

COUNTY OF SURREY

BOROUGH OF EPSOM AND EWELL

Annual Report

of the

MEDICAL OFFICER OF HEALTH

and


SCHOOL MEDICAL OFFICER

for the year

1969

*Incorporating a Report by the Chief
Public Health Inspector on the work
of the Health Inspectors throughout
the year*





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BOROUGH OF EPSOM AND EWELL

PUBLIC HEALTH COMMITTEE AS CONSTITUTED AT 31st DECEMBER, 1969

Chairman: Alderman W. J. CLARK, F.I.A.S., F.R.S.A., F.R.S.H.

Vice-Chairman: Councillor Mrs. L. D. RINGSDORE

Alderman J. R. GALE; Councillors M. N. ARTHUR, A.I.O.B., M.R.S.H., P. J. BENNETT, A.M.I.E., Grad.I.E.D., W. R. CARPENTER, N. F. COLYER, M.A., W. J. M. CROSLAND, Mrs. D. J. FENDER, Mrs. D. M. HARRISON, L. F. C. MILLER, A.C.I.S., R. W. SMITH, E. J. VERYARD

Ex Officio Members

THE MAYOR (Councillor F. N. K. PAUL)

DEPUTY MAYOR (Councillor T. G. HOLLAND)

STAFF OF THE HEALTH AND WELFARE DEPARTMENT AT 31st DECEMBER, 1969

Medical Officer of Health

D. J. SHEERBOOM, M.B., B.S., D.P.H.

Deputy Medical Officer of Health

DAPHNE M. KIRKMAN, M.B., B.S., D.C.H., D.P.H.

Medical Officer

JILL M. E. CORBETT, M.B., CH.B.

Dental Officers

GODFREY ASHWORTH, L.D.S., H.D.D., F.D.S.

MRS. A. ROBERTSON, L.D.S. (Part-time)

Chief Public Health Inspector

L. H. GRACE, F.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector

WM. C. ALDER, A.R.S.H., M.A.P.H.I.

Public Health Inspectors

W. H. GRAY, M.A.P.H.I.

C. E. MALLETT, M.A.P.H.I.

R. G. CLARK, M.A.P.H.I.

Pupil Public Health Inspector

F. M. SEABRIGHT

Borough Nursing Officer

Miss J. DORRINGTON, S.R.N., S.C.M., H.V.CERT.

Domiciliary Nurses and Midwives

(a) Whole-Time

Miss K. M. DUNCOMBE, S.R.N., S.C.M., Q.N.
(Senior Nurse)
Mrs. M. M. KEENAN, S.R.N., R.M.N.
Mrs. M. MCGREGOR, S.R.N.
Mrs. S. PARKER, S.R.N., Q.N.
Miss A. M. B. SIMPSON, S.R.N., S.C.M.
Miss T. WILLIAMS, S.R.N., S.C.M., Q.N.

Miss J. HENDERSON, S.R.N., S.C.M., Q.N.
Mrs. D. E. HOUSE, S.R.N.
Mrs. G. MACKAY, S.E.A.N.
Miss J. MILLS, S.R.N., S.C.M., Q.N.
Mr. L. C. PRETTY, S.R.N., Q.N.
Mrs. J. TOWNEND, S.R.N.

(b) Part-Time

Mrs. T. W. BENT, S.R.N.
Mrs. V. J. CLARKE, S.R.N.
Mrs. B. HIRST, S.R.N.

Mrs. E. BLATCHLEY, S.R.N., S.C.M.
Mrs. M. GIBSON, S.R.N.
Mrs. M. C. JONES, S.R.N.

(c) Nursing Auxiliaries

Mrs. L. GEORGE Mrs. R. COKER

School and Clinic Nurses

Mrs. D. M. CLARK, S.R.N.
Mrs. E. MACDONALD, S.R.N.

Mrs. N. R. COPLAND, S.E.N.
Mrs. D. PRETTY, S.R.N.

Health Visitors

Mrs. C. CHALUPKA, S.R.N., H.V.CERT.
Miss H. DAVIES, S.R.N., S.C.M., H.V.CERT.
Miss W. M. EVERS, S.R.N., R.M.N., H.V.CERT.
Miss J. M. HEADLEY, S.R.N., S.C.M., H.V.CERT.
Mrs. D. A. SHARPE, S.R.N., S.C.M., H.V.CERT.
Mrs. C. WALL, S.R.N., S.C.M., H.V.CERT.

Mrs. C. C. COTTON, S.R.N., S.C.M., H.V.CERT.
Mrs. S. E. DONOVAN, S.R.N., S.C.M., H.V.CERT.
Miss F. M. GOLTON, S.R.N., S.C.M., H.V.CERT.
Mrs. B. J. HEWETT, S.R.N., H.V.CERT.
Miss E. H. SPENCER, S.R.N., S.C.M., H.V.CERT.
Mrs. E. Y. WRIGHT, S.R.N., S.C.M., H.V.CERT.

Senior Social Worker

H. F. E. PALMER

Social Workers (Families)

Miss G. M. WISE, A.M.I.A.

Social Worker (Blind)

Miss M. A. FRANKLIN, *Diploma of College of Teachers of the Blind and the Declaration of Recognition of Experience in Social Work*

Social Workers (Handicapped)

Mrs. M. COWLES, B.SC.(SOC.)

Social Worker (Deaf)

Mrs. J. HOOK

Senior Mental Welfare Officer

J. SALLIS

Mrs. M. T. MUIL

Welfare Assistant

Mrs. M. POOLE

Mental Welfare Officers

Miss K. MOLLOY

Vacancy

Chiropodists

Mrs. A. DEARLOVE, M.CH.S.
Miss O. L. M. LOFTS, M.CH.S. *(Part-time)*

J. P. COLEMAN, M.CH.S. *(Part-time)*
B. H. BARR, M.CH.S. *(Part-time)*

Physiotherapist

Mrs. B. GILBERT, M.C.S.P.

Dental Surgery Assistants

Mrs. J. HOLLADAY

Miss D. M. JOPP

Home Help Supervisor

Mrs. D. E. TAPPING

Matron of Day Nursery

Mrs. R. HYLAND, S.R.N.

(Waltham House Day Nursery)

Clerical Staff to the Medical Officer of Health

(Administrative Assistant) R. A. STAY

Mrs. P. A. V. DAVIES

Mrs. F. M. BLACK

Mrs. K. F. DICKSON

Mrs. P. PICKLES

Miss W. WARWICK

(Part-time) Miss A. FRANKLIN, A.C.I.I.

R. E. THORPE, A.R.S.H. *(Senior Clerk)*

Miss T. LONGHURST

Mrs. W. E. BRIDGES

Mrs. T. MORRISON

Mrs. C. B. RALPH

Miss L. WIGGAN

Clinic Clerks

(Part-time) Mrs. M. J. G. FOREMAN

Mrs. J. STOUT *(Part-time)*

Chief Public Health Inspector's Clerical Staff and Outdoor Staff

(Chief Clerk) W. J. JENKINS

Mrs. Y. M. ROBERTS

(General Assistant) J. CLISSOLD

Mrs. E. G. CLARKE

Miss P. E. TREHEARN

A. BAWDEN *(Rodent Operative)*

To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell

MR. MAYOR, LADIES AND GENTLEMEN,

I have much pleasure in presenting the Annual Report on the state of the public health and welfare in Epsom and Ewell for 1969. The Report is in the form as requested by the *Ministry of Health AND SOCIAL SECURITY DEPARTMENT*

The Registrar General's estimated population was 72,190 a decrease of 110 on 1968. The number of deaths from all causes increased from 1,096 to 1,114 giving a crude death rate of 15.4. The live birth rate was 12.0 compared with 12.1 in the previous year.

The health of the Borough was good throughout the year except for the very last two weeks when the epidemic of "Hong Kong" Flu reached its peak and absenteeism was marked.

Although it was a measles year, the number of cases was small and in fact there were only 59 more cases than in 1968. These figures would probably have been even less had Vaccination been able to continue throughout the year, but unfortunately supplies of vaccine ceased in the Summer.

The "Well-Women" Clinic was again well attended throughout the year and in October a "Well-Men" Clinic was started (see page 30).

After various set-backs, the new Nurses' Home, Anderson House in Alexandra Road, was finally opened in January. This is a purpose-built Nurses' Home consisting of 8 Flats for permanent Staff on the Top Floor and 8 Bed-sitting Rooms on the First Floor for Student Nurses, etc., with a Dining-Room and other offices on the Ground Floor. There is also a Warden's Flat within the building and it is the Warden's duty not only to supervise the general running of the building but to provide meals for the Students. There is no doubt that all the services provided are serving a very useful need in the County.

On the 10th December, a small ceremony of "sod-cutting" took place on the site of the new Health Centre at Bourne Hall, Ewell. The ceremony was performed by His Worship The Mayor, Councillor F. N. K. Paul, and Dr. B. J. Brooks on behalf of the General Practitioners involved. Representatives of the Surrey County Council were in attendance. It is hoped that the building will be in use early in 1971.

In June the long awaited Report on Local Government Reform (The Maud Report) was presented to Parliament and it was expected that the second Green Paper on the re-organisation of the National Health Services would arrive by the end of the year. This did not take place and it is anticipated that 1970 will be an important year when both these Reports will be fully discussed and in addition the Government's views on the Scebom Report will be known.

Due to the re-organisation of the Social Services by the Surrey County Council, Mr. H. F. E. Palmer, who had been for many years the Welfare Officer covering a larger area than Epsom and Ewell, was appointed as Senior Social Worker in charge of the social work of the Department. This has led to a closer liaison between all the members of the Department.

It is with deep regret that I have to report the death of the Council's Veterinary Surgeon, Mr. George Forbes, which took place on the 13th November 1969. Mr. Forbes, whose knowledge was sought not only in this Country but abroad, had served this Authority for many years and his death was a great sorrow to all his colleagues.

I should like to record my appreciation of the support and encouragement I have received from the Chairman and Members of the Public Health Committee, to Mr. L. H. Grace, the Chief Public Health Inspector, and his staff, and for the friendly co-operation I have received from all other Departments.

Once again I should like to give my sincere thanks to all Members of the Health and Welfare Department for their loyal and efficient service during the year.

I am, Mr. Mayor, Aldermen and Councillors, Your obedient Servant,

*D. J. SHEERBOOM,
Medical Officer of Health.*

PART ONE

GENERAL

AND

STATISTICAL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1969

VITAL STATISTICS FOR THE YEAR

Area (acres)				8,427
Population (Census 1961)				71,159
Population (estimated mid-year 1969)				72,190
Density (persons per acre)				8.57
Number of inhabited houses at 31.12.69				22,733
Rateable value at 31.12.69				£4,146,288
Product of penny rate				£16,940
Live Births	<i>Males</i>	<i>Females</i>	<i>Total</i>	
Legitimate	433	380	813	
Illegitimate	30	23	53	
	<hr/> 463	<hr/> 403	<hr/> 866	
Live birth rate per 1,000 population				12.0
Standardised birth rate				13.6
Illegitimate live births per cent of total live births				6.0
Still Births	<i>Males</i>	<i>Females</i>	<i>Total</i>	
Legitimate	2	1	3	
Illegitimate	—	1	1	
	<hr/> 2	<hr/> 2	<hr/> 4	
Still birth rate per 1,000 live and still births				5.0
Deaths	<i>Males</i>	<i>Females</i>	<i>Total</i>	
Private Residents			735	
Patients in Mental Hospitals			379	
	<hr/> 528	<hr/> 586	<hr/> 1,114	
Crude death rate				15.4
Standardised death rate				9.4
Deaths of Infants under 1 year of age	<i>Males</i>	<i>Females</i>	<i>Total</i>	
Legitimate	5	6	11	
Illegitimate	—	1	1	
	<hr/> 5	<hr/> 7	<hr/> 12	
<i>Infant mortality rate per 1,000 live births:</i> Total				14.0
Legitimate				14.0
Illegitimate				19.0
Neonatal Mortality				
Number of deaths of infants under 4 weeks of age			8	
Neonatal mortality rate per 1,000 live births				9.0
<i>Early Neonatal Mortality</i>				
Number of deaths of infants under 1 week of age			7	
Early neonatal mortality rate per 1,000 live births				8.0
<i>Perinatal Mortality</i>				
Still births and deaths under 1 week per 1,000 live births				13.0
Maternal Mortality				
Maternal deaths (including abortions)				Nil

POPULATION

The Registrar General's estimate of population for 1969 was 72,190 and this figure has been used for statistical purposes in the preparation of this Report. The estimate is 110 lower than in the previous year.

The number of deaths exceeds the number of live births by 223. This apparently high proportion of deaths is in part accounted for by the large number of elderly patients in the five mental hospitals in the Borough. The number of occupied beds in the mental hospitals was 6,395 compared with 6,460 in 1968.

Births

Live births totalled 866 representing a birth rate of 12.0 per 1,000 population. The Registrar General by providing a comparability factor (1.13 for Epsom), makes adjustments in respect of each area having regard to variations in age and sex distribution of population and the influence on the birth rate of the large institutions in this district. By applying the comparability factor to the crude birth rate the standardised birth rate of 13.6 is obtained compared with the figure of 16.3 for England and Wales in 1969.

Deaths

The number of deaths assigned by the Registrar General was 1,114 compared with 1,090 in 1968. Of this total 379 occurred in the local mental hospitals in patients whose stay exceeded six months. Where death occurred within six months of admission the death was assigned to the district from which the patient had come. The crude death rate was 15.4 per 1,000 total resident population. By applying the Registrar General's comparability factor, 0.61, to the crude death rate a standardised death rate of 9.4 is obtained compared with the figure of 11.9 for England and Wales in 1969.

Causes of Death

The causes of death are classified in Table III, the total deaths amounting to 1,114. The commonest killer is disease of the heart and blood vessels (543). Respiratory disease, especially bronchitis and pneumonia in the elderly, and malignant disease are the two other major causes of death.

Accidental Deaths

Road accidents involving motor vehicles accounted for 8 deaths—3 less than in 1968.

Accidents other than Road Accidents

These accidents accounted for 9 deaths—2 less than in 1968.

Suicide

The number of suicides was 10 compared with 3 in 1968. Most of these were by an overdose of drugs.

Infant Mortality

The infant mortality rate (i.e. deaths of infants under 1 year per 1,000 live births) was 14.0 for the Borough compared with 18.0 for England and Wales. Of the 12 infant deaths, 8 occurred during the first 4 weeks. Five of the deaths were due to prematurity, 2 to atelectasis, 2 to accidents, one to heart failure, one to leukaemia and one to peritonitis.

Maternal Mortality

There were no maternal deaths in 1969.

TABLE I

COMPARATIVE BIRTH, DEATH AND MATERNAL MORTALITY RATES, AND INCIDENCE RATES OF INFECTIOUS DISEASE FOR THE YEARS 1968 AND 1969

<i>Rates per 1,000 Population</i>	1968	1969
Births		
Live birth rate (crude)	12.1	12.0
Deaths		
All causes (crude)	15.2	15.4
Typhoid and Paratyphoid	—	—
Whooping Cough	—	—
Diphtheria	—	—
Tuberculosis	—	0.03
Influenza	0.27	0.22
Smallpox	—	—
Poliomyelitis	—	—
Pneumonia	2.3	2.32
Measles	—	—
Incidence of Infectious Diseases		
Typhoid	—	0.01
Paratyphoid	—	0.04
Meningococcal Infections	0.01	—
Scarlet Fever	0.14	0.24
Whooping Cough	0.32	0.01
Diphtheria	—	—
Erysipelas	0.06	—
Smallpox	—	—
Measles	2.3	3.1
Pneumonia	0.03	—
Poliomyelitis: Paralytic	—	—
Non-paralytic	—	—
Food Poisoning	0.1	0.14
Dysentery	0.15	0.1
Malaria: Contracted abroad	—	.03
Indigenous	—	—
Tuberculosis: Respiratory	0.13	0.11
Non-respiratory	0.13	0.03
Puerperal Pyrexia	—	—
Infective Jaundice	0.06	0.27
Infant Mortality		
<i>Rates per 1,000 Live Births</i>		
Under 1 year of age	12.6	14.0
Under 4 weeks of age (neonatal)	9.2	9.0
Under 1 week of age (early neonatal)	5.7	8.0
<i>Rates per 1,000 Total (Live and Still) Births</i>		
Still Births	13.6	5.0
Perinatal Mortality	19.5	13.0

TABLE II
COMPARATIVE BIRTH, DEATH AND MORTALITY RATES 1881-1969

	BIRTH RATE PER 1,000 POPULATION		DEATH RATE PER 1,000 POPULATION*		MORTALITY RATES PER 1,000 LIVE BIRTHS OF CHILDREN UNDER ONE YEAR OF AGE	
	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>
1881 - 1890	32.4	26.2	19.1	14.5	142.0	107.0
1891 - 1900	29.9	22.9	18.2	13.7	153.0	121.0
1901 - 1910	27.2	24.9	15.4	11.7	128.0	93.0
1911 - 1920	21.8	18.2	14.3	11.5	100.0	71.0
1921 - 1930	18.3	16.1	12.1	9.8	72.0	49.0
1931 - 1940	14.9	12.6	12.3	7.3	58.0	41.0
1941 - 1950	16.9	14.2	12.3	9.4	43.1	28.4
1951 - 1960	15.8	10.4	11.6	15.0	24.8	19.1
1961	17.4	11.4 (13.6)	12.0	14.0 (9.5)	21.6	23.8 (19 deaths)
1962	18.0	12.5 (14.7)	11.9	15.4 (10.2)	21.6	13.7 (12 deaths)
1963	18.2	12.6 (14.2)	12.2	15.8 (9.9)	20.9	27.0 (24 deaths)
1964	18.4	12.8 (14.5)	11.3	14.7 (9.3)	20.2	18.5 (17 deaths)
1965	18.1	13.0 (14.7)	11.5	15.0 (9.45)	19.0	15.0 (14 deaths)
1966	17.7	13.5 (15.2)	11.7	15.3 (9.48)	19.0	19.5 (19 deaths)
1967	17.2	11.7 (13.2)	11.2	15.3 (10.1)	18.3	10.7 (9 deaths)
1968	16.9	12.1 (13.8)	11.9	15.2 (9.3)	18.0	12.6 (11 deaths)
1969	16.3	12.0 (13.6)	11.8	15.4 (9.4)	18.0	14.0 (12 deaths)

* Deaths of patients in mental hospitals included from 1953. From 1956 the standardised death rate allows for the high mortality in residential institutions, such as hospitals for mental illness.
(Bracketed figures represent standardised rates)

TABLE III
CAUSES OF DEATH IN THE BOROUGH OF EPSOM AND EWELL

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis of Respiratory System	1	—	1
Other Tuberculosis, including late effects	—	1	1
Syphilis and its sequelae	2	—	2
Other Infective and Parasitic Diseases	1	—	1
Malignant neoplasm, buccal cavity, etc.	1	2	3
Malignant neoplasm, oesophagus	6	2	8
Malignant neoplasm, stomach	7	13	20
Malignant neoplasm, intestine	6	19	25
Malignant neoplasm, larynx	1	1	2
Malignant neoplasm, lung, bronchus	41	8	49
Malignant neoplasm, breast	—	15	15
Malignant neoplasm, uterus	—	7	7
Malignant neoplasm, prostate	9	—	9
Leukaemia	3	2	5
Other Malignant neoplasms	29	34	63
Benign and unspecified neoplasms	2	1	3
Diabetes Mellitus	4	3	7
Other Endocrine, etc. Diseases	1	—	1
Anaemias	—	2	2
Other Diseases of Blood, etc.	1	—	1
Mental Disorders	6	8	14
Other Diseases of Nervous System, etc.	6	9	15
Chronic Rheumatic Heart Disease	5	8	13
Hypertensive Disease	16	17	33
Ischaemic Heart Disease	142	124	266
Other forms of Heart Disease	22	33	55
Cerebrovascular Disease	53	55	108
Other Diseases of Circulatory System	22	46	68
Influenza	4	12	16
Pneumonia	75	92	167
Bronchitis and Emphysema	20	11	31
Asthma	—	1	1

(Table continued on next page)

(Table III continued)

	Males	Females	Total
Other Diseases of Respiratory System	3	3	6
Peptic Ulcer	6	4	10
Intestinal Obstruction and Hernia	1	3	4
Cirrhosis of Liver	—	1	1
Other Diseases of Digestive System	4	9	13
Nephritis and Nephrosis	2	4	6
Hyperplasia of Prostate	1	—	1
Other Diseases, Genito-Urinary System	1	3	4
Diseases of Skin, subcutaneous tissue	—	1	1
Diseases of Musculo-Skeletal System	1	4	5
Congenital Anomalies	2	2	4
Birth injury, difficult labour, etc.	2	2	4
Other causes of Perinatal Mortality	—	3	3
Symptoms and ill-defined conditions	6	6	12
Motor Vehicle Accidents	7	1	8
All other Accidents	3	6	9
Suicide and Self-Inflicted Injuries	3	7	10
All Other External Causes	—	1	1
Total	528	586	1,114

SERVICES UNDER THE PUBLIC HEALTH ACTS

Water Supply

The source of the Borough's water supply remains unchanged. Epsom, including the local hospitals, is supplied from the deep chalk wells of the Council's undertaking in East Street. It is the routine practice for the Borough Water Engineer to send weekly samples of raw water to the County's Public Health Laboratory in London. Reports throughout the year were satisfactory. In addition regular samples of raw water from this source were submitted to the Public Health Laboratory in Epsom and all were found to be satisfactory. Ewell is supplied mainly from the Sutton District Water Company's chalk wells in Carshalton Road, Sutton, and in Woodmansterne. Monthly samples were submitted to the County's Public Health Laboratories. A part of the Borough in the Stoneleigh and Worcester Park area (population 7,018) is supplied by the Metropolitan Water Board (River Thames). The quality control at the Water Board's Laboratories was carried out by means of daily sampling and 100 per cent samples of treated water were negative for Bact. coli (Type 1). Part of West Park Hospital supply, about 50,000 gallons per day, is pumped from a deep well on the site—all samples of raw water from the well proved satisfactory.

Chlorination of all raw water was carried out before it was put into supply. All samples of tap water going into supply gave a satisfactory report.

The chemical analyses of the water from the Borough's undertaking and from the Sutton District Water Company were reported on at regular intervals and below are given typical results.

	<i>Epsom and Ewell Corporation</i>	<i>Sutton District Water Company</i>
Appearance	Clear and Bright	Bright with a slight white deposit of minute particles of calcium carbonate
Colour	Nil	Nil
Odour	Nil	Nil
pH	7.3	7.8
Electric Conductivity	550	260
Dissolved Solids dried at 180°C	370	190
Chlorine as Chloride	23	18
Free Carbon Dioxide	23	7
Alkalinity as Calcium Carbonate	235	85
Hardness: Total	305	120
Carbonate	235	85
Non-Carbonate	70	35
Nitrate Nitrogen	9.2	5.5
Nitrite Nitrogen	Absent	Absent
Ammoniacal Nitrogen	Nil	0.20
Oxygen absorbed	0.05	0.10
Albuminoid Nitrogen	Nil	Nil
Residual Chlorine	Nil	0.25
Metals: Iron	Absent	Absent
Zinc	Absent	Absent
Copper	Absent	Absent
Lead	Absent	Absent

The fluoride content in the Sutton District Water Supply was reported to be 0.1 part per million or less, in the Thames 0.25 parts per million and to be not more than a trace in the Epsom Wells supply. No serious shortage of water was reported throughout the year. Every house in the built-up areas in the Borough is supplied direct from mains. One house isolated in the middle of a wood, was dependent on rain water storage. The occupants of 27 caravans were supplied from stand-pipes.

Fluoridation of the Public Water Supply

In July 1969, a further Circular No. 8/69 was received from the Department of Health and Social Security, again stressing the importance of this procedure, and asking all Local Authorities, who had not already done so, to arrange for the addition of Fluoride to the public water supplies as soon as possible. Up to the time of writing this Report, no firm decision has been taken in the Borough of Epsom and Ewell regarding this latest Circular.

Cesspools

There were 42 cesspools in the Borough. Pail chemical closets were in use at 23 caravans and at 6 other premises.

Sewage and Sewage Disposal

The sewage from the Borough is piped to the disposal works administered by the Greater London Council. This arrangement works satisfactorily and prevents any untreated sewage effluent being discharged into local streams.

Swimming Baths and Pools

The Municipal Baths were open from April to October. The total attendances were 101,725. The swimming bath is well maintained and the system of continuous filtration and chlorination renders the water safe as far as communicable disease is concerned. Samples of water from a privately owned open air swimming pool were sent for bacteriological examination, and the owners advised if the amount of chlorine needed to be increased. Satisfactory reports were received from the Pathology Laboratory on samples of water from the school bathing pools.

Housing

I am indebted to the Borough Engineer for information about the number of new dwellings erected during the year.

Erected by Local Authority	.	.	.	49
Erected by private enterprise	.	.	.	169

At the end of the year 787 applicants were on the Council's waiting list for re-housing.

The scope of the Health Inspectors' work dealing with housing, the improvement of houses under the Housing Acts and the clearance of properties which are unfit for human habitation is detailed in the Chief Public Health Inspectors' report.

Sanitary Inspection of the Area

The work carried out by the Health Inspectors on the sanitary supervision of the District is detailed in the Report of the Chief Public Health Inspector.

Land at Lower Cox Lane, West Ewell

The large scale environmental improvements that took place in 1968 were maintained last year. In addition re-housing has continued and by the end of the year only 23 caravans were on the site, and it is to be hoped that all will be re-housed in the not too distant future. The presence of a permanent site Warden has greatly helped to overcome everyday problems and many members of my Department have continued to give active support during the year to all families requiring medical or social help.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

Notifiable Infectious Disease

1969 was a very satisfactory year as regards Notifiable Diseases. There were no outbreaks of any disease in either the general community, in schools or in any of the local hospitals or institutions. Even though it was a "Measles Year", there were in fact only 226 notifications as against 581 in 1967, the previous "Measles Year".

Table I includes death rates and incidence rates of the Notifiable Infectious Diseases, with the figures for the previous year for comparison. Table IV shows the number of cases of Infectious Diseases notified during 1969. Table V shows the incidence of Notifiable Infectious Disease classified according to age and sex, with the exception of tuberculosis, which is dealt with in Tables VI and VII.

Smallpox

No cases were reported during the year.

Vaccination as before was available either through the family doctor or at the clinics throughout the Borough. During the year 640 primary vaccinations (584 in 1968) and 424 re-vaccinations (119 in 1968) were carried out. The increase in the primary vaccinations is satisfying, and the marked increase in the re-vaccinations is due to the fact that 1969 was the first year of the new schedule of immunisations, in which it was advised that re-vaccination should take place on all school entrants.

Diphtheria

Fortunately it is now 16 years since a case of Diphtheria has been notified in the Borough. The occasional report of small outbreaks in schools in other areas does, however, show that the disease is ever present and is only being kept in check by a satisfactory rate of immunisation. The Table below shows the numbers of immunisation procedures for 1969, which in some cases are below that for 1968. This is explained by the fact that the new schedule suggests that the optimum ages for primary vaccination are six, eight and twelve months. This means that many children born in 1969 have not yet finished their Course.

Immunisation Procedures Carried Out

<i>Inoculations</i>	<i>Carried out by General Practitioners</i>	<i>Carried out at Schools and Clinics</i>
<i>Primary</i>		
Triple (Diphtheria, Whooping Cough and Tetanus)	163	337
Combined (Diphtheria and Tetanus)	1	Nil
Tetanus only	32	3
<i>Reinforcing</i>		
Triple (Diphtheria, Whooping Cough and Tetanus)	159	379
Combined (Diphtheria and Tetanus)	145	601
Tetanus only	55	2

Poliomyelitis

Once again no case of either paralytic or non-paralytic disease was notified. The number of primary vaccinations carried out was 475, a fall on 1968 but due again as in the case of Diphtheria to the different timing under the new schedule. The number of re-inforcing doses was 1,466, over 600 more than in 1968, due to all school entrants receiving re-inforcing doses. Only oral vaccine was used and during the year it became official policy that the subcutaneous (Salk) vaccine would no longer be manufactured.

Typhoid and Paratyphoid

One case of Typhoid Fever and 3 cases of Paratyphoid Fever occurred during the year. In each case the patient had contracted the disease abroad, and fortunately did not infect anyone in this Borough. With the great increase of travellers, including holiday makers, to more exotic places abroad, and the slow increase of immigrants coming into the Borough, these diseases are likely to become increasingly frequent.

Food Poisoning

There were only 5 cases occurring amongst the community and 5 cases in the local hospitals. These latter were all due to immigrant staff arriving in this country, as carriers of food poisoning organisms. It thus shows the importance of all the hospitals, who employ such staff, to have them adequately examined on arrival.

Dysentery

Once again there was a decrease from the previous year, namely only 7 as against 11 cases. This is most satisfactory, especially considering the numbers of large institutions in the Borough, where outbreaks are always a possibility.

Influenza

Vaccine was again offered to all Borough Council Staff and the Staffs of the Health and Welfare and Education Departments. In addition it was offered to the staff of the Day Nursery and the Wells Residential Nursery. At the end of the year the "Flu epidemic" was at its height and it was too early to state whether the vaccine was offering any protection.

At least in theory the vaccine was the correct one, namely that immunity should have developed against the Hong Kong virus, which was the prevalent strain in the epidemic.

Scarlet Fever

There was a slight rise in the number of cases notified, namely from 10 to 17. All cases were again mild and gave rise to no complications.

Measles

Although it was a "Measles Year" only 226 cases were notified. It was hoped that because of the new vaccine which commenced to be given on a large scale in 1968 and which should have continued in 1969, the number of notified cases would have been even less. Unfortunately, however, early in the year, vaccine produced by one manufacturer had to be withdrawn, and supplies overall became virtually non-existent. During the whole year only 462 children received the vaccine. Whether, therefore, the amount of vaccine so far given, did in fact cause this low number of notifications is open to doubt. It is to be hoped that the vaccine position will improve in 1970.

Whooping Cough

For the whole of 1969 I received only one notification as against 23 in 1968, though whether this was really the true position in the Borough is doubtful.

Infective Jaundice

1969 was the first full year that this disease has been notifiable. During the year there were 19 cases, all of whom were either visited or reports obtained from the Doctors concerned. I am pleased to say that none of the cases were caused by illicit drug-taking.

Tetanus, Leptospirosis and Yellow Fever

1969 was the first full year in which these three diseases were notifiable, but fortunately no cases occurred.

Tuberculosis—Register of Tuberculous Persons

During the year the names of 16 persons were added to the Tuberculosis Register and 71 were removed. Details of these alterations are as follows:

Additions to Register

Primary notifications relating to private residents already residing in this district	6
Primary notifications of persons residing in Institutions:	
(a) already resident	4
(b) on admission	Nil
Transfer of private residents notified in other areas, now residing in this district	4
Transfer of persons notified in other areas now residing in Institutions in this district	1
Number of cases (previously removed) restored to Register during the year	1
Posthumous Notifications:	
(a) in private households	Nil
(b) in Institutions	Nil
	<hr/>
	16

Removals from Register

By removal to other districts:	
(a) Private residents	11
(b) Patients in mental institutions	4
By recovery:	
(a) Private residents	36
(b) Patients in mental institutions	10
By death:	
(a) Private residents	6
(b) Patients in mental institutions	4
	<hr/>
	71

Of the 10 names removed from the Register because of death only one was certified as due to Tuberculosis.

At the end of the year the number of names on the Register totalled 250 distributed as follows:

	Respiratory		Non-Respiratory	
	Male	Female	Male	Female
In private residences	74	45	4	14
In institutions	96	12	3	2
	<hr/>	<hr/>	<hr/>	<hr/>
	170	57	7	16

Notifications of Tuberculosis

Ten notifications were received from medical practitioners of persons certified, so far as is known, for the first time, to be suffering from tuberculosis. In Table VI these cases are classified by sex and age and sub-divided into pulmonary and non-pulmonary types of disease. In Table VII the number of notifications received in previous years is given for purposes of comparison.

Extra Nourishment

Provision of special nourishment in the form of milk was granted in 11 selected cases for varying periods during the year.

B.C.G. Vaccination against Tuberculosis

This protection is available at Chest Clinics to close contacts who are Tuberculin negative. Vaccination is also available to children who are approaching school leaving age. Consent forms were sent to parents of school leavers and there was a high acceptance rate. The results are shown below:—

Number tested	452
Number Tuberculin positive	41 (equivalent to 9.1%)
Number of children vaccinated	396

72 pupils at Epsom College were given B.C.G. vaccination and 30 children who missed vaccination in previous years.

Mass Radiography Service

From 4.00 to 4.45 p.m. every Friday, the Mass X-Ray Unit is sited outside the "Spread Eagle" in Epsom High Street. In addition the Unit visited the Stoneleigh area, the Epsom College and various factories, etc., in the Borough. A total of 2,546 persons attended for chest X-ray examination.

I am very pleased to be able to report that no cases of active pulmonary tuberculosis were discovered. However, 3 cases of lung cancer were found, 2 male and 1 female, and referred for appropriate action.

Public Health Laboratory Service

Bacteriological investigations were carried out by the Public Health Laboratory, West Park Hospital, Epsom, under the direction of Dr. D. R. Gamble, to whom grateful acknowledgement is made. Specimens may be submitted by doctors, veterinarians, dentists, persons acting on behalf of medical officers of health, such as health inspectors and health visitors, or by representatives of official bodies. Specimens cannot be accepted from private persons. The routine specimens examined fall under two main headings:—

- (a) medical specimens;
- (b) sanitary specimens from local or food authorities or, by arrangement, from commercial undertakings.

SERVICES UNDER THE FOOD AND DRUGS ACT 1955

The wide range of duties of Health Inspectors in this field is detailed in the Report of the Chief Public Health Inspector.

Poultry Inspection

There are no poultry processing premises within the Borough.

TABLE IV
NOTIFICATION OF INFECTIOUS DISEASES

	<i>Notifications of Diseases occurring in Private Houses</i>	<i>Notifications of Diseases occurring in Hospital</i>	<i>Total</i>
Typhoid Fever	1	—	1 (—)
Paratyphoid Fever	2	1	3 (—)
Meningococcal Infections	—	—	— (1)
Scarlet Fever	17	—	17 (10)
Whooping Cough	1	—	1 (23)
Diphtheria	—	—	— (—)
Smallpox	—	—	— (—)
Measles	226	—	226 (167)
Poliomyelitis: Paralytic	—	—	— (—)
Non-Paralytic	—	—	— (—)
Food Poisoning	5	5	10 (7)
Dysentery	7	—	7 (11)
Malaria: Contracted abroad	1	1	2 (—)
Indigenous	—	—	— (—)
Tuberculosis: Respiratory	3	5	8 (9)
Non-Respiratory	2	—	2 (9)
Tetanus	—	—	— (—)
Yellow Fever	—	—	— (—)
Leptospirosis	—	—	— (—)
Infective Jaundice	13	6	19 (4)

TABLE V—NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX (FOR TUBERCULOSIS SEE TABLE VI)

	Under 1 year		1-2		3-4		5-9		10-14		15-24		25-44		45-64		65 years and over		All Ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1 (—)
Paratyphoid Fever	—	—	—	—	1	—	—	—	—	—	1	1	—	—	—	—	—	2	1	3	(—)
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(1)
Scarlet Fever	—	—	—	—	5	2	2	7	1	—	—	—	—	—	—	—	—	8	9	17	(10)
Whooping Cough	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	(23)
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Measles	4	5	21	19	34	29	54	53	—	3	—	2	2	—	—	—	—	115	111	226	(167)
Poliomyelitis: Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Non-Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Food Poisoning	1	—	—	—	—	—	—	2	—	—	3	2	—	2	—	—	—	4	6	10	(7)
Dysentery	—	—	2	—	—	—	1	1	—	—	—	1	—	1	—	—	—	4	3	7	(11)
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	2	—	2	(—)
Tetanus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Yellow Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Leptospirosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Infective Jaundice	—	—	—	—	—	—	3	2	2	1	3	1	2	4	—	1	—	10	9	19	(4)

TABLE VI
NOTIFICATION OF TUBERCULOSIS BY AGE AND SEX

Year	Private Residents				Mental Hospital Patients				Total	
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary			
	M	F	M	F	M	F	M	F	M	F
Under 1 year	—	—	—	—	—	—	—	—	—	—
1 – 4	—	—	—	—	—	—	—	—	—	—
5 – 9	—	—	—	—	—	—	—	—	—	—
10 – 14	—	—	—	—	—	—	—	—	—	—
15 – 19	—	—	—	—	—	—	—	—	—	—
20 – 24	—	—	—	—	1	—	—	—	1	—
25 – 34	1	—	—	—	1	—	—	—	2	—
35 – 44	1	1	1	—	—	—	—	—	2	1
45 – 54	—	—	—	—	1	—	—	—	1	—
55 – 64	—	—	—	1	—	—	—	—	—	1
65 and over	—	—	—	—	2	—	—	—	2	—
Total	2	1	1	1	5	—	—	—	8	2

TABLE VII
TUBERCULOSIS INCIDENCE AND MORTALITY RATES 1934-1969
(QUINQUENNIAL AVERAGES 1934-1968)

Year	Primary Notifications	Notification Rate per 1,000 Population	Deaths	Death Rate per 1,000 Population
1934 - 1938	44	0.78	18	0.35
1939 - 1943	67	1.11	33	0.52
1944 - 1948	75	1.15	26	0.36
1949 - 1953	66	0.96	19	0.28
1954 - 1958	53	0.78	14	0.20
1959 - 1963	34 (16)	0.49	4 (2)	0.05
1964 - 1968	23 (8)	0.32	2 (1)	0.03
1969	10 (5)	0.14	1 (—)	0.01

Figures relating to patients in mental hospitals situated in the district are included in the total. These are also shown separately in the bracketed figures.

PART TWO

**PERSONAL
HEALTH
SERVICES**

PERSONAL HEALTH SERVICES

“Well-Women” Clinic

The “Well-Women” Clinic sessions continued throughout the year at the Church Street Clinic. I am grateful to Mr. H. A. Milne, Consultant Gynaecologist, who conducts the Clinic and to Dr. M. Levene, Consultant Pathologist at St. Helier Hospital, who reports to us the results of the cervical smears.

The statistics for 1969 are as follows:

Number of Clinic Sessions	60
Number of Attendances:	
First Appointments	659
Re-examinations	257
	————— 916

The majority of the results were either normal or showed only minor changes, but in four cases it was found necessary to carry out operative treatment. This certainly emphasises the importance of a Clinic such as this.

Ante-Natal Care

Ante-Natal sessions are held at the Health Clinics in Ewell and Epsom. At Ewell a weekly session is conducted by a Consultant Obstetrician from Epsom District Hospital assisted by a Medical Officer of the Borough Council. The Midwives hold a session twice weekly at Ewell Clinic and once weekly at Epsom Clinic.

Details of attendance at these sessions are given below:

<i>Clinic</i>	<i>Sessions held by</i>	<i>Number of Women who attended during the year</i>	<i>Total Number of attendances during the year</i>
Ewell	Obstetrician and Medical Officer	160	1,053
Ewell	Midwives	131	526
Epsom	Midwives	73	262

In addition 78 women attended Ewell Clinic for post-natal examination.

Expectant Mothers attended as under at Ewell and Epsom Clinics for Mothercraft (Health Visitors) and Relaxation Exercises (Physiotherapist).

	<i>Number of women who attended</i>	<i>Number of new cases</i>	<i>Total attendances</i>	<i>Sessions per month</i>
Ewell	101	83	496	4
Epsom	69	69	323	4

Midwifery Service

The proportion of domiciliary confinements in 1969 was as follows:

<i>Total Births Live and Still</i>	<i>Domiciliary Confinements</i>	<i>Domiciliary Confinements Percentage of</i>
871	127	14.6

Details of the work of the domiciliary midwives in 1969 was as follows:

Confinements:

(a) Doctor booked	124
(b) Doctor not booked	3
(c) Miscarriages	1

Number of visits paid by Midwives:

Ante-natal visits	1,094
Visits during labour/puerperium/post-natal and visits to cases discharged from hospital before end of 10th day	2,379

Based on a 10-day lying-in period, hospital beds are provided for approximately 62 per cent of all confinements. The shortage of maternity beds has necessitated a large number of “early discharges” (48 hours after delivery). When the expectant mother first attends the Hospital Ante-Natal Clinic, the Obstetrician will base his decision whether or not she is to be booked for hospital confinement:

- (a) on her medical history;
- (b) on home conditions as reported by the domiciliary midwife.

If she is considered suitable for “early discharge”, the Borough Nursing Officer ensures that a District Midwife will accept the care of the mother and infant during the remainder of the lying-in period while the Home Help Supervisor makes the necessary arrangements for domestic help.

Analysis of Notified Births

	Live Births	Still Births	Total
Born at Home (Local Authority Midwives)	127	—	127
Born in Hospitals	732	6	738
Born in Nursing Homes	6	—	6
Total	865	6	871

Prematurity (i.e. babies weighing 5½lbs. or less at birth)

Equipment is provided by this Department for the care of premature infants born at home and adequate provision is available in hospital.

(a) Number of premature infants notified:

Place of Birth	Live Births	Still Births
Own home	3	—
Maternity Homes	—	—
Hospital	52	3
Total	55	3

(b) Deaths of premature infants within 28 days:

In Hospital	6
At Home	—
Total	6

Phenylketonuria

1969 was the first full year in which every baby born either in the Epsom District Hospital or on the District received the Guthrie Test as against the Phenistix Test. All the tests were sent to the Laboratory at Queen Mary's Hospital, Carshalton, and I am grateful to Dr. R. L. Newman, Consultant Pathologist, and his Staff for their ever helpful co-operation. Only a few babies required re-testing for one reason or another, but I am pleased to report that no case of Phenylketonuria was discovered.

Congenital Malformations

Local Health Authorities are required to report to the Registrar General all congenital malformations noted at birth. During the year there were 36 notifications representing 4.1 per cent of total births. The malformations came under the following headings:

Central Nervous System	5
Alimentary System	2
Deformities of Limbs	18
Uro-genital Deformities	4
Eye and Ear	3
Pigmented Naevus	2
Musculo-skeletal	1
Mongolism	1
Total	36

All cases of congenital malformations are kept under observation and, if necessary, added to our Register of Handicapped Children.

The Unmarried Mother and her Child

The welfare of Unmarried Mothers and their Children continued in the hands of the Social Workers of the Epsom Deanery Association and the Southwark Catholic Children's Society. During the year 9 girls, ages ranging between 18 and 27 years, were admitted to Voluntary Homes or to the Surrey County Council Home, Dorincourt, Woking. Five of these mothers kept their babies and the other four had their babies adopted.

For economic reasons, the Surrey County Council, decided that Dorincourt should cease to be used as a Mother and Baby Home in November 1969 when the Guildford Diocesan Council for Social Work opened a new Mother and Baby Home at West Lodge, Walton-on-Thames. As a major proportion of the capital cost of this building was provided by the County Council by way of a grant, twelve beds at the Home were allocated to the County. It is expected that this will be sufficient to enable the Home to accept the majority of Surrey girls needing care in a Mother and Baby Home.

Child Welfare Clinics

These were held in the afternoons at :

Average Attendance
per Session

Ewell Court :	
Mondays, Wednesdays and Thursdays	71
Church Hall, Dell Lane, Stoneleigh :	
Tuesdays	31
Church Hall, Northey Avenue, Cheam :	
Wednesdays	40
Church Street, Epsom :	
Mondays and Wednesdays	58
Wells Social Centre, Epsom :	
1st, 3rd and 5th Tuesdays	32
Church Hall, Rosebery Road, Epsom Downs :	
2nd and 4th Tuesdays	31

Clinic Attendance

Clinic	Number of children attending clinics born in			
	1969	1968	1967-64	Total
Ewell Court	367	431	897	1,695
Dell Lane	60	58	213	331
Northey Avenue	36	53	161	250
Epsom	247	268	420	935
Wells	31	30	84	145
Epsom Downs	15	22	58	95
Total	756	862	1,833	3,451

Welfare Foods

National dried milk, orange juice, cod liver oil and vitamin tablets are obtainable during clinic sessions for the use of expectant and nursing mothers, children up to the age of five years and handicapped children. In addition, a large variety of proprietary foods are on sale at all clinics at reduced prices. This service is run by voluntary helpers.

REPORT OF THE SENIOR DENTAL SURGEON

The Dental Care of Mothers and Pre-School Children

Some 27 mothers received treatment during the year. This small number is indicative of the fact that the majority of expectant and nursing mothers are, or have been, under the care of the general dental practitioners in the district.

Among the pre-school children, the number inspected was 282, and some 118 received treatment. Most of these children were brought to the Clinics for examination, the remainder were inspected at the Nursery Classes of two Ewell Schools, at the Waltham House Day Nursery and at The Wells House Residential Nursery. The Medical and Dental Staff in their contact with parents have endeavoured to emphasise at every opportunity the importance of regular dental care from the age of 2 or 3 years. From the numbers inspected during the year, there is at least some evidence of a growing interest and concern by parents for the dental health of their infants and younger children.

Summary of Treatment

(a) Number provided with dental care

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	11	10	27	19
Children under 5 years	282	121	118	107

(b) Forms of dental treatment provided

	Scaling and Gum Treatment	Fillings	Silver Nitrate Treatment	Extractions	General Anaesthetics	Dentures Provided Full Partial		X-rays
Expectant and Nursing Mothers	11	47	—	2	—	—	—	4
Children under 5 years	—	273	4	56	36	—	—	5

Two Dental Treatment Centres were in use for services shown above and the equivalent of 52 Dental Officer Sessions were devoted to Maternity and Child Welfare patients during the year.

(c) Attendance for dental inspection and treatment

Expectant and Nursing Mothers	65
Children under 5 years	298

Audiological Service

In accordance with accepted practice, all babies have a hearing test at the age of 7 months and any case requiring further investigation is referred to the County Audiologist. During the year 726 children had screening tests for hearing and 26 were referred as above. Again, I would stress the importance of the ascertainment of severe deafness before the child's first birthday and certainly before the second. At this early age the specialist teacher is able to get the maximum response from the child's residual hearing and so to teach him to watch for speech and to develop speech and language.

Recuperative Holidays

Holidays are arranged for patients who have been ill in their own homes or in hospital and who require a period of recuperation without nursing or medical care.

Particulars of cases dealt with during the year are as follows:

	Recommended by Hospital Departments	Recommended by General Practitioners	Total
Number of Patients	1	23	24

Medical Arrangements for Long-Stay Immigrants

The medical examination and surveillance of long-stay Immigrants was continued in accordance with the Ministry of Health's advice. During the year we confirmed that 110 Immigrants had taken up residential posts in our local hospitals where they had the usual health checks. Health Visitors called on 21 other immigrants, advised them on how to make best use of our Health Services and gave each an appointment to attend at Epsom Chest Clinic for X-ray and B.C.G. Vaccination if necessary.

Medical Examinations

During the year I continued to carry out all superannuation and other medical examinations of the Borough Council Staff. In all 119 examinations were carried out.

Home Nursing

At the end of the year we were up to our full establishment of the equivalent of 15 full-time District Nurses/Midwives. In addition we were employing two part-time Nursing Auxiliaries in order to relieve the qualified staff of unskilled nursing duties.

During the year three Nurses attended Refresher Courses for District Nurses, two Nurses attended a Practical Field Work Instructors' Course and a Nursing Auxiliary attended a Day Course at Guildford. In addition all District Nurses attended a Conference on Family Planning.

Below are given particulars of patients nursed during the year:

Age Group	Number of Patients	Number of Visits
Under 5 years	4	10
Between 5 and 64 years	310	7,051
65 years and over	737	25,866

Pads for the Incontinent

Incontinence Pads and protective undergarments are supplied to patients, free of charge, on the recommendation of a Medical Practitioner or a member of the Borough Nursing Staff. During the year 80 incontinent patients came under the care of the District Nurses and approximately 13,000 pads were supplied.

Disposal of Soiled Pads

In homes where there is an open fire or a solid fuel boiler disposal is easy. Where no facilities exist for burning, the soiled pads are placed in specially made waterproof paper bags supplied by the Public Health Department which arranges for collection and disposal by incineration.

Incontinent Laundry Service

1969 was the first full year of this new Service, and once again I am grateful to the Management Committee and Staff of West Park Hospital for allowing it to run so smoothly. There is no doubt that it fulfils a very important need and is much appreciated. During the year 24 persons received this service, which, upon average, meant 74 sheets per month collected and exchanged.

Epsom Day Nursery, Waltham House

Waltham House is a Training Nursery of 50 places. The staff at the Nursery, excluding domestic staff, consists of Matron, Deputy Matron, Warden, six Nursery Nurses and four Students. This conforms with the standards for the staffing of Day Nurseries laid down by the Ministry of Health in 1965.

The average daily attendances each month during 1969 were:

Month	Children Aged		Total Average Daily Attendances
	0-2	2-5	
January	10.6	18.8	29.4
February	12.6	24.7	37.3
March	14.7	23.4	38.1
April	15.9	22.1	38.0
May	14.9	25.4	40.3
June	16.0	28.3	44.3
July	14.1	25.0	39.1
August	8.6	20.9	29.5
September	6.2	28.5	31.8
October	9.1	28.9	38.0
November	7.0	27.0	34.0
December	8.2	25.4	33.6

The average daily attendance for the year was 36.1.

Nurseries and Child Minders Regulation Act 1948 as amended by Health Services and Public Health Act 1968

1969 was the first full year under the new Regulations. All persons who wished to register as a Child Minder or to register premises for use as a Play Group were visited by Officers authorised by the Local Authority and full personal and medical details obtained and a full inspection made of the premises, whether it be a private house or church hall, etc. Advice was given regarding feeding, proper supply and use of play equipment, safety of the children, etc., and the number of children entitled to be looked after was fixed. Once registered the premises were regularly visited and inspected.

At the end of the year the number of premises and child minders registered was as under:

	Number registered as at 31.12.69	Number of children looked after
Nursery Premises	17	544
Child Minders	48	156

Nursing Homes Act and Regulations 1963

The Nursing Homes Act 1963 and the relevant Regulations provide for sufficient and competent staffing, adequate space, furnishing and nursing equipment with sufficient sanitary and washing facilities, light, heating and ventilation. There is only one Nursing Home in the Borough which provides 17 beds for geriatric patients. It is regularly inspected by the Medical Officer of Health and the Borough Nursing Officer and is always maintained at a high standard.

National Assistance Act 1948

National Assistance (Amendment) Act 1951

Under Section 47 of the 1948 Act power is given to the Councils of County Boroughs and County Districts to apply to a Court of Summary Jurisdiction for an Order for removal and detention in a suitable hospital or other place:

of persons who are suffering from grave chronic diseases, or being aged, infirm or physically incapacitated are living in insanitary conditions, and of persons who are unable to devote to themselves, and are *not* receiving from other persons, proper care and attention.

I am pleased to state that it was not necessary to deal with any cases under the Act during 1969.

Ambulance Facilities

The public ambulance service is under the control of the Surrey County Council and the main ambulance control station is situated at Walton Lodge, Banstead (telephone Burgh Heath 53491). There is a sub-station in Church Street, Epsom.

In accidents in the home or elsewhere or in case of sudden illness in streets or public places any responsible person may call an ambulance, telephone 999.

Where there is doubt about the maternity patient's fitness for the journey, the decision must be made by the doctor in charge or by a certified midwife who should accompany the patient in the ambulance to hospital. The removal of cases of illness or accident will be arranged by the hospital concerned, or by the medical practitioner in charge of the patient.

Family Planning

The same arrangements have continued during this year as before, namely the Council providing a Family Planning Service indirectly through the Family Planning Association, whose local branch conducts Clinics at:

Epsom District Hospital—twice a week

Epsom Health Clinic—twice a week

Ewell Court Health Clinic—once a week

One of the sessions at the Epsom Clinic is devoted to the use of the intra-uterine device.

At these sessions the Regional Hospital Board and the Borough Council provide accommodation and clinic facilities free of charge.

Venereal Disease

Press and posters give information to persons, who think they may be suffering from venereal disease, about Hospital Centres where free treatment under conditions of privacy may be obtained. Evening Clinics were available for both sexes at St. Helier Hospital, Carshalton and St. Thomas's Hospital, London. Below are given particulars of new cases at St. Helier Hospital:

	Syphilis		Gonorrhoea		Other Conditions	
	Male	Female	Male	Female	Male*	Female*
Epsom and Ewell	—	—	7	2	63	26

** The majority of these conditions are not venereal*

Health Visitor Service

Our establishment of Health Visitors, twelve in number, consists of the following:

6 general Health Visitors based at Ewell Clinic

3 general Health Visitors based at Epsom Clinic

1 Geriatric Health Visitor attached to group practices of General Practitioners

1 Geriatric Health Visitor based at Ewell Clinic

1 Tuberculosis Health Visitor attached to the Chest Department of Epsom District Hospital

At the end of the year we were one under our full establishment as we had not been successful in finding a replacement for Miss F. M. Golton, general Health Visitor, who had resigned on taking up an appointment in Algiers.

During the course of the year, two Health Visitors attended Refresher Courses, one attended a Day Release Course for Field-work Instructors to Health Visitors, and all Health Visitors attended Courses on Family Planning and Mentally Sub-Normal Children.

The average case load of families per Health Visitor on general duties was 419.

Number of children visited by Health Visitors during the year:

Born in 1969	Born in 1968	Born in 1964-67	Total
896	942	3,223	5,061

Clinic Attendances made by Health Visitors

(a) Child Welfare Sessions	437
(b) Health Education (including Mothercraft)	143
(c) Geriatric Sessions	98

The Tuberculosis Health Visitor is responsible for the community care of patients suffering from tuberculosis and other chest conditions. At the end of the year 203 families were under her care.

Chiropody

Chiropody was available throughout the year to elderly persons, physically handicapped (including the blind and partially-sighted) and expectant mothers.

1. By approved private Chiropodists who practise in their own Surgeries.
2. By Chiropodists employed by the Council, one full-time and three part-time who do a total of 10 sessions per week.

In every case the maximum charge is 3s. 0d. per treatment.

The Council make no charge for this service to any person who is in receipt of a supplement to pension from the Department of Health and Social Security or whose means are so limited that to pay such charge would be likely to render him eligible to receive a supplement to pension.

Domiciliary treatment is provided for any person who is physically unable to make the journey. This service, much appreciated and rapidly expanding, helps to keep the old person ambulant.

Details of treatment given are shown below:

1. <i>In the Surgeries of Chiropodists approved by the Council</i>	
Number treated during 1969	871
Number of treatments given in Surgeries	4,870
Number of treatments given at homes of patients	536
2. <i>Council Chiropodists</i>	
Number treated during 1969	1,042
Number of treatments given at Clinics and Old People's Homes	2,962
Number of domiciliary treatments	2,214

Home Help Service

The past year has been full of activity. Two meetings were held for the Home Helps. The first one, in November, was a Talk and Demonstration by our Physiotherapist, Mrs. B. Gilbert. Owing to the increasing number of disabled patients and elderly handicapped people who are now receiving the Home Help Service, it was felt that it was not only beneficial, but essential, for the Home Helps to know how to deal with such cases if an emergency arose. The meeting was enthusiastically attended and the questions put by the Home Helps showed the frequency with which they were meeting this type of situation. The second meeting was a "Christmas party get-together" with other members of the Health and Welfare Domiciliary Services, and in the relaxed and informal atmosphere, the Home Helps discussed many topics of mutual interest with both voluntary and statutory workers.

There were a number of retirements during the Summer and, as a result, in the early Winter a successful recruiting campaign was mounted. Owing to the co-operation and help of the general practitioners, clinics and voluntary organisations in the Borough who displayed our posters to maximum advantage, although running below strength for a short period of time, we are now once more approaching our establishment of the equivalent of 21 full-time Home Helps.

Home Helps employed at the end of the year:

Whole-time Home Helps employed	8
Part-time Home Helps employed	21
Equivalent full-time Home Helps	15.38

Number of cases assisted during the year:

Aged 65 years and over	326
Chronic sick and tuberculous	49
Mentally disordered	6
Maternity	76
Others	82
	<hr/>
	539

Average hours of help given per case 55

Welfare Services Provided Under the National Assistance Act 1948

(a) Blind and Partially-Sighted

Persons who have been certified as blind or partially-sighted by an Ophthalmologist may be registered with the Borough. Registration is not compulsory, but the blind and partially-sighted persons are encouraged to accept registration in order to qualify for certain benefits specially provided. Braille and Moon lessons are given to those on the Register, and they are

supplied with literature on both teaching methods. Travel concessions, talking book machines and wireless sets can be obtained by registered blind persons and, through the services of the Surrey Voluntary Association for the Blind, holiday grants are available to those who qualify. In addition, the blind persons can obtain apparatus, games, etc., from the Royal National Institute for the Blind at concession prices.

All persons on the Register receive home visits from the full-time Home Teacher for the Blind and they are encouraged to attend the Handicraft Class which is held on Monday afternoons at Christehurch Hall. Transport and other help at the Class is provided by voluntary workers.

The Home Teaeher was in attendance at the Borough Show where she had an exhibition of apparatus for the Blind and displayed work done by the blind persons of the borough. A blind home worker, Mr. W. Groombridge, was also present with his guide dog, Nesta, and he gave a demonstration of chair-caning. The Home Teacher also attended the borough Horse Show where she had a stall for the sale of artieles made by blind persons.

Incidence of Blindness

Number registered as blind during year	16
Number registered as partially-sighted during year	11

Registration of Blind

Blind persons on Register at 31st December 1968	189
Number registered during year	16
Number transferred in from other areas	9
Number re-certified	Nil
	<hr/> 25
	214
Number who died during year	15
Number transferred to other areas	7
Number de-eertified	Nil
	<hr/> 22
	192
	<hr/>

Age groups of blind persons as at 31st December 1969

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Under 5	—	—	—
Aged 5-15	—	1	1
Aged 16-29	2	3	5
Aged 30-49	7	5	12
Aged 50-69	14	42	56
Aged 70 and over	30	88	118
	<hr/> 53	<hr/> 139	<hr/> 192

At 31st Deeember 1969 there were 66 Blind Persons in Swail House.

Swail House is administered by the London Association for the Blind, but the Borough Home Teacher for the Blind visits and helps these blind people in the same way as other blind residents in Epsom and Ewell.

There were 78 "C" Cases—these are Blind Persons in Hospitals and Homes in this area who are on the register of other authorities but may receive assistance from our Home Teaeher for the Blind.

There was one blind Home Worker—a chair seater—whose earnings were augmented by the Local Authority.

No blind persons were employed in sheltered workshops but there is one blind person from this Borough at Leatherhead School for the Blind.

Partially-Sighted

Number of Partially-Sighted on Register at 31st December 1969:

Male	17
Female	22
	<hr/>
Total	39

(b) Deaf

The Social Worker for the Deaf is available for the help and guidance of deaf adults and children, some of whom are without speech, and the parents of deaf children of school age. She assists in placing deaf men and women in suitable employment and maintains regular contact with them, she is proficient in the manual language of the Deaf and helps in many problems not common to hearing people.

During the year two special days were held for deaf children in the County and children from this Borough were invited. This enables children to meet others in the area, who are similarly handicapped, and the parents of such children to come into contact with others who have similar problems.

In conjunction with voluntary associations it is hoped to arrange more of these days which have proved beneficial to parents and children alike. The Worker also keeps in contact with Riverview Partially-Hearing Unit.

We were sorry to lose the services of Mr. C. M. J. Davies, Social Worker for the Deaf, who left in September 1969 to take up an appointment with the Royal National Institute for the Deaf, but are fortunate to now have the services of Mrs. Jane Hook.

The number of persons on the Register of the Deaf at 31st December 1969 was as follows:

Number of adults in the community	31
Number of adults in hospitals	63
Number of children up to school-leaving age	26
	<hr/>
	120
	<hr/>

(c) Physically Handicapped

The disabled were visited in their homes by two part-time Social Workers and a Welfare Assistant, who procured aids and advised them on house adaptations. The County Council's Occupational Therapy Unit at Fetcham purchased the aids and assisted with the adaptations. Articles are supplied free on loan, except where the applicant elects to pay the cost. During the year the Council supplied 360 aids to 135 persons.

The Epsom and Ewell Club for the Physically Handicapped continued to meet on alternate Tuesday afternoons at the Congregational Church Hall, Ewell. Membership rose to 47 physically handicapped persons during 1969. The Club still hires a coach and the Surrey County Council provide special transport for the severely handicapped, but we have a waiting list for the severely disabled who would like to come to the Club when transport becomes available.

Last year the Club raised over £300 for the cost of coach outings and the Christmas lunch held at a Hotel in Reigate. In May a group went to Nyetimber Holiday Camp, Bognor, for one week. The Voluntary Association for the Surrey Disabled arranged special holidays for 17 physically handicapped persons.

Two Physically Handicapped persons were sponsored by the Local Authority at Sheltered Workshops.

Number of Physically Handicapped persons on the Register at 31st December 1968	382
Number of Physically Handicapped persons added during 1969	124
Number of Physically Handicapped persons removed during 1969	67
Number of Physically Handicapped persons on the Register at 31st December 1969	439

Type of Handicap and Age Group of persons on Physically Handicapped Register at 31st December 1969

	<i>Under 16</i>	<i>16-29</i>	<i>30-49</i>	<i>50-64</i>	<i>65 or over</i>	<i>Total</i>
(1) Amputation	—	—	—	4	12	16
(2) Arthritis or Rheumatism	—	—	6	32	136	174
(3) Congenital malformations or deformities	12	8	5	2	2	29
(4) Discases of the digestive and genito-urinary systems, of the heart or circulatory system, of the respiratory system (other than tuberculosis) or of the skin	—	—	1	6	34	41
(5) Injuries of the head, face, neck, thorax, abdomen, pelvis, or trunk. Injuries or diseases (other than tuberculosis) of the upper or lower limbs and of the spine	1	2	2	8	30	43
(6) Organic nervous diseases—epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc.	1	5	16	47	59	128
(7) Neuroses, psychoses, and other nervous and mental disorders not included on line 6	—	—	—	3	—	3
(8) Tuberculosis (respiratory)	—	—	—	—	—	—
(9) Tuberculosis (non-respiratory)	—	—	—	—	—	—
(10) Diseases and injuries not specified above	—	—	—	2	3	5
Total	14	15	30	104	276	439

Families at Risk

Working with these families is the most comprehensive but least specialised of all forms of social casework. Frequently a family is referred with a specific problem and then the Worker may find that when looking at the family as a whole a different kind of help has to be given to each of its members. Families where there are difficult personal problems are referred and they may remain the concern of the Worker for many years. It may be possible to help where a family has got into a muddle with paying the rent or with hire purchase payments. The Worker often finds that the adults have found the struggle with their problems too much for them. It is often very difficult to discover the cause of their trouble. The underlying problems of people are sometimes less obvious than their misfortunes or mis-management and the Worker may have to decide whether they are due among other possible causes to emotional difficulties, to the low standard of intelligence of the parents, to poor health, to over-crowding or to inadequate income or perhaps to a combination of many factors. There may be several reasons for the inability of the parents to cope with their own problems and as soon as the Caseworker finds out what they are, she does her best to help them to help themselves and to sort their lives out. All efforts will be directed towards making them self-reliant and to restoring their self respect.

Families may need practical help in solving difficulties—a mother of a family may have to be persuaded to visit a doctor to obtain advice about her health or even taken to see her Doctor. Or the Worker may have to work with one or more members of the family to help them with their emotional problems. A family's difficulties very largely disappear when a parent is helped to feel capable of taking the responsibilities and difficulties of married life.

It is necessary to have a full knowledge of the scope and functions of the Social Services and to know where to apply for help. There is a close link with other Social Workers who may pass cases on to her when they find intensive help is needed for a particular family. The probation service may ask her to see the wife and children of a man in prison for a short sentence so that help is waiting for him to assist him to settle down at home to a happy law-abiding life. Or she may be asked by the children's department to help the parents of children whom they have in their care so that the family may remain united. It is part of the Worker's skill to know how to continue social work that has been begun by someone else.

Families of very low standards need long-term casework in an effort to keep the family together. The work itself is difficult for it often requires a struggle to enlist the goodwill and co-operation of the family the Worker is trying to help and to encourage them to think of the

Worker not as a critic or someone in authority, but as a helpful person who has confidence in them and who will not be unduly upset by their failures.

At the end of the year, 31st December 1969:

Number of families under supervision	64
Number of children in these families	205
Number of children of these families in the care of the Local Authority	1

Health Education

The continuous process of Health Education followed similar lines to previous years. Relaxation and Mothercraft Courses were held by the Physiotherapist and Health Visitors. Each Course was augmented by one evening meeting to which husbands were invited. Husbands and wives were also invited to parentcraft evenings which were held in both main Clinics.

Groups of Students from local Hospitals and Ewell Technical College visited Clinics during the course of the year in order to observe the various types of work carried out in the Clinics.

Many talks were given to various Voluntary Organisations and in Schools by the Medical Officer of Health, the Borough Nursing Officer, Health Visitors and District Nurses. The talks included such diverse subjects as drugs, baby care, hypothermia, diet, etc.

A wide variety of leaflets and posters were displayed in both Clinics which are equipped with display boards for various aspects of Health Education. In addition both Clinics have a magnetic board on which special topics are displayed for one month. These topics include such subjects as care of the teeth, accident prevention, care of the feet and smoking.

A cassette projector was acquired and is used at Parentcraft Meetings, Mothercraft, Infant Welfare, Elderly and "Well-Men" Clinics.

"Well-Men" Clinics

Arising out of the main "Screening Week" in September 1967 has developed the now well-established "Well-Women" Clinics, basically for the investigation of Cervical Cancer but also providing a much fuller examination. It was felt, however, that since there were now Infant Welfare Clinics, the School Health Service, Adolescent Advice Centres, "Well-Women" Clinics and Geriatric Clinics, that the only large group of the population not receiving any general advice, were males aged 45 to 65. With the increase in coronary heart disease, chronic chest diseases including lung cancer, obesity, amongst others, and the fact that this particular age group are probably the most productive for the country as a whole, and whose wives and families depend upon them financially, it was felt that some type of Clinic should be offered.

After a great deal of thought and discussion, and in view of the limited staff, time, space and especially money available, it was decided to run the Clinic basically as one for Health Education with some simple screening procedures as well.

The Clinic, held in the early evening on alternate Tuesdays, commenced on 21st October, being staffed by two Health Visitors, a Physiotherapist and a Clerk. Ten men are seen at each session by appointment only. All attending spend some time in the Waiting Hall where there are many books, pamphlets, etc., on health topics and a perpetual film on the cassette projector.

The Health Visitor then takes a medical and social history with stress on physical recreations and hobbies, types of holiday, smoking, exercise, sleep, type of work, etc. Tests are carried out for Haemoglobin, Urine, Blood Pressure, Vision, Height and Weight, and it is hoped that Audiometry will also be added. The Health Visitor discusses various health topics with each person, with particular reference to any subject that she feels is applicable in each case. He is finally seen by the Physiotherapist, who advises on any everyday problem that might be worrying him and also instructs him regarding correct posture and breathing, etc.

The Clinic appears so far to be well appreciated but it is too early to say whether it is in fact serving any useful purpose. By the end of the year, 45 men had attended and there is a small waiting list.

Care of the Elderly

1969 was the 21st Anniversary of the Old People's Welfare Committee, and they are to be congratulated on the way their various services have increased over the years and for the help, comfort and guidance which they have been able to provide to the elderly of the Borough during this time. It is to be hoped that this good work and the happy relationship which has been built up between the statutory and voluntary personnel will continue.

The Services provided by the Old People's Welfare Committee have continued as before, namely the provision of a daily meals-on-wheels Service, support to the various Old People's Clubs, the running of the special weekly Anderson Club for house-bound elderly in Myers Hall, the sending out of Christmas parcels and increasing the ever important Service of providing voluntary visitors. The number of regular visitors has now increased to about 60.

It is worth noting also that the Committee are receiving ever increasing help from the young people in the Borough, and all the senior schools provide help in some way or another. There is also an increasing liaison between the Committee and the staff of Richmond House, a Surrey County Council Old Persons' Home, which is to the benefit both for the elderly in the Home and those in the community.

Housing for the elderly, as always, remains a problem. The Borough Council has plans for several new housing sites all of which contain a good percentage of accommodation for the elderly. The Epsom Parochial Charities and the Epsom and Ewell Housing Association are also increasing their accommodation, but of course this all takes time. One aspect which is very worrying is that some elderly persons appear to be penalised for thrift. They find themselves as owner occupiers of property now too big for them, not entitled to go on to the Council's housing list, not eligible for the housing associations and unable to find or afford smaller accommodation at present day prices. The end result of which is that they themselves become more and more depressed and what was once a good house with a nice garden becomes untidy, neglected and finally in a state of complete disrepair. There appears to be no quick solution to this present day dilemma.

The work of the Geriatric Health Visitors has continued throughout the year as has the work of the Social Workers, particularly those concerned with Aids for the elderly and handicapped. Mention should also be made of the work done by the Home Helps, without whose services many old people would no longer be able to stay in their own homes but would swell the ever increasing lists for admission to hospital or permanent care in Welfare Homes.

Welfare Clinics for the Elderly

We have continued to hold Clinics for the elderly at both Epsom and Ewell Court Centres in order to try and prevent or defer the various medical and social problems occurring in this age group.

Each session is under the general direction of Health Visitors supported by helpers from voluntary organisations, and each elderly person can discuss his general, medical and social problems as well as having tests taken for vision, hearing, blood pressure and anaemia, etc., apart from routine weighing. Advice is given re. diet, etc., and welfare foods (e.g. Ovaltine) and vitamin supplements are available at cost price.

A Physiotherapist attends regularly and gives group instruction and exercises in order to promote better breathing, mobility and posture. This is, however, only given with the family doctor's consent. Chiropody is provided and hearing tests are carried out in appropriate cases, and arrangements made for the supply of a hearing aid.

These Sessions are not held in any sense in competition with the services provided by family doctors, but rather to help elderly people to remain well and active both in mind and body for as long as possible.

The total attendance figure for both Clinics in 1969 was 954.

Mental Health

As a result of the Survey carried out by Miss I. Menzies on the relationship between the community and the five psychiatric hospitals, a special Liaison Committee was set up with the object of trying to relieve the general population, particularly of Court and Stamford Wards, of their anxiety regarding so many mentally ill persons in their midst. The Committee consists of representatives of the South-West Metropolitan Regional Hospital Board, the Borough Council, the local Hospitals and the Surrey County Council and the Police. The Committee met several times and the most important decision was that the present Day Centre in Waterloo Road be transferred from the control of the Surrey County Council to the Regional Hospital Board and that it be turned into a Day Hospital, to which patients living in the area could attend for treatment rather than be admitted to Hospital. At week-ends the same building could be used for referring any person, who was causing any trouble in the Town, so that he could be taken into care. The present Day Centre patients would be transferred to buildings in the Brighton Road, Banstead, and the important Voluntary Handshake Club would use the Javelin Club in Hook Road. It was hoped that these new arrangements would take place early in 1970.

Another very important decision was made during the year by the Regional Hospital Board regarding West Park Hospital. Up to the present time, the Hospital receiving mental patients from Epsom and Ewell has been the Netherne Hospital, Coulsdon, which has meant very difficult journeys for all visiting relatives, etc. However, as from 1st January 1970, West Park Hospital will assume responsibility for Epsom and Ewell patients, and the Hospital will be administered by the new combined Epsom and West Park Hospital Management Committee. This move should greatly improve the liaison between all branches of the mental health services in the Borough to the advantage of the patients and their relatives.

In order to try and improve the existing field-work services of the Mental Health Service, the Surrey County Council decided to alter the areas served by the various mental health Welfare Officers. This has meant that the Borough now has its own team of Officers, which again has led to a better liaison with all the other field-workers.

Provisions for the Sub-Normal

The Junior Training School at Old Schools Lane, Ewell, continues to provide 65 day places for sub-normal children aged 2-16 years. This includes 15 children of 2-5 years in the Nursery Section at Forty Foot Hill, Forty Foot Road, Leatherhead.

The Special Care Unit, which was opened at the School in September 1967, caters specially for children with multiple handicaps. Seven children attended this Unit in 1969 and the good progress made by these children has proved the value of this special addition to the School.

Summer holidays are organised by the Surrey County Council each summer for boys and girls of 7-16 years wishing to participate. The holidays are for a two-week period and are held at Winterton-on-Sea near Yarmouth.

For the first time a group of children, aged 10 to 16 years, attended the Epsom Baths each week during the Summer season for swimming instruction.

Day Centre

This Centre in Waterloo Road run by Trained Staff appointed by the Surrey County Council has continued throughout the year.

Early in 1970, the Centre will be transferred to The Larches, Brighton Road, Banstead, as the Centre in Waterloo Road, will be taken over by the South-West Metropolitan Regional Hospital Board and run as a Day Hospital.

As all the patients attending the present Day Centre are brought by transport, the transfer to Banstead will be of no hardship to them.

Voluntary Organisations

The Borough is very fortunate in possessing many Voluntary Organisations or individual helpers in the field of general welfare or for the more specific needs of the mentally and physically disabled. These include the Handshake Club, which is soon to be transferred to the Javelin Club, the Industrial Therapy Organisation (Epsom) Ltd., for the rehabilitation of the mentally ill, the Multiple Sclerosis Society, the Spastic Society, the T.B. Voluntary Care Committee and many others.

Voluntary Organisations are still a vital necessity in this Welfare State as they are able to provide many services and practical help which is not available through the various statutory bodies.

Mental Health—Statistics

(a) *Mental Illness—Mental Health Act 1959*

CASES DEALT WITH INSIDE THE LOCAL (MENTAL) HOSPITALS

	Males	Females	Total
Section 25 (Observation Order)	182	137	319
Section 26 (Treatment Order)	50	31	81
Total	232	168	400

HOSPITAL ADMISSIONS FROM ADDRESSES IN EPSOM AND EWELL

	Males	Females	Total
Section 5 (Informal*)	12	18	30
Section 29 (Emergency Observation—3 day Order)	8	20	28
Section 25 (Observation Order—28 days)	4	7	11
Section 26 (Treatment Order)	—	1	1
Section 60 (Court Order—One Year)	2	—	2
Section 136 (Police Order—3 days Place of Safety).	1	—	1
Total	27	46	73

* This figure represents the number of patients admitted informally by the Mental Health Social Worker. A larger number are admitted informally by medical practitioners and from psychiatric clinics but we have no record of this figure.

(b) *Care and After-Care*

Total number receiving Community Care as at 31st December 1969:

Males	41
Females	33
Total	74

(c) *The Sub-Normal and Severely Sub-Normal*

POSITION AT END OF 1969

	Males	Females	Total
Number of children attending Junior Training School	7	9	16
Number of adults attending Adult Technical Training Centres	11	8	19
Total	18	17	35
Number of children in community care of Health Visitor	7	11	18
Number of adults in community care of Health Visitors and Mental Health Officers	34	22	56
Total	41	33	74

LOCATION AND TIME-TABLE OF CLINICS

ANTE-NATAL CLINICS

Epsom District Hospital	Mon., Thurs	2.00 p.m.
Church Street, Epsom	Fri. (Midwives)	2.00 p.m. – 4.00 p.m.
Ewell Court, Ewell	Mon. (Midwives)	9.30 a.m. – 12 noon
	Tues. (Midwives)	2.00 p.m. – 4.00 p.m.
	Fri. (Midwives)	2.00 p.m. – 4.00 p.m.

CHILD WELFARE CLINICS

Church Street, Epsom	Mon., Wed.	2.00 p.m. – 4.00 p.m.
Ewell Court, Ewell	Mon., Wed., Thurs.	1.30 p.m. – 4.00 p.m.
Dell Lane, Stoneleigh	Tues.	2.00 p.m. – 4.00 p.m.
St. Stephen's Church Hall, Rosebery Road, Epsom Downs	2nd and 4th Tues. in month	2.00 p.m. – 4.00 p.m.
Community Centre, Wells Estate, Epsom	1st, 3rd and 5th Tues. in month	2.00 p.m. – 4.00 p.m.
St. Paul's Church Hall, Northey Avenue, Cheam	Wed.	2.00 p.m. – 4.00 p.m.

DENTAL CLINICS

Church Street, Epsom	By Appointment
Ewell Court, Ewell	By Appointment

EYE CLINICS

Church Street, Epsom	By Appointment
Ewell Court, Ewell	By Appointment

GERIATRIC CLINICS

Church Street, Epsom	Tues.	9.30 a.m. – 12 noon
Ewell Court, Ewell	Wed.	9.30 a.m. – 12 noon

IMMUNISATION AND VACCINATION CLINICS

Church Street, Epsom	Fri.	9.30 a.m. – 12 noon
Ewell Court, Ewell	Fri.	9.30 a.m. – 12 noon

FAMILY PLANNING ASSOCIATION

Epsom District Hospital	Tues., Fri.	7.00 p.m. – 8.30 p.m.
Church Street, Epsom	Thurs.	9.30 a.m. – 12 noon
Ewell Court, Ewell	Tues.	9.30 a.m. – 12 noon

CHEST CLINIC

Epsom District Hospital	Mon., Tues.	2.00 p.m.
	Thurs.	9.30 a.m.
	1st Thurs. in month (B.C.G.)	2.00 p.m.

MINIATURE X-RAY CLINIC

Epsom District Hospital	Mon.	2.00 p.m. – 3.00 p.m.
	Tues.	10.30 a.m. – 11.30 a.m.

*VENEREAL DISEASES CLINIC

St. Helier Hospital	Males:	Mon. 9.30 a.m. – 1.30 p.m.
		Wed. 4.00 p.m. – 6.00 p.m.
		Thurs. 4.00 p.m. – 6.00 p.m.
	Females:	Tues. 4.30 p.m. – 6.30 p.m.
		Wed. 2.00 p.m. – 4.00 p.m.
		Fri. 2.00 p.m. – 6.00 p.m.

*(And at the Out-Patients Department of many London Hospitals)

PART THREE

**ENVIRONMENTAL
HEALTH
SERVICES**

May 1970

To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit my Annual Report on the work of the Public Health Inspectors for the year ended 31st December 1969 in accordance with the Public Health Officers Regulations 1959.

In that section of the Report dealing with Housing, I show the very real progress which has been made in the compulsory improvement of houses since the Housing Act 1964 and the continued steady action to reduce the number of unfit houses. I have commented upon the new provisions of the Housing Act 1969 as to their affect on the improvement of houses, but one aspect of the new legislation namely the introduction of Qualification Certificates, where 97 applications from landlords have been received since the coming into force of the Act (August) up to December 1969, already indicates the demand by owners to get a "fair rent" agreed.

The work carried out to protect the public as to the quality and purity of food and its hygienic presentation for sale in shops, is a continuing major part of the Public Health Inspector's duty. Standards of hygiene continue to rise, aided by modern methods of packaging and cool storage, but much remains to be achieved.

Experience shows that regular inspections of food premises promote the best results, and it is encouraging to find that the larger retail traders have raised their standards of hygiene both by the training of their employees and the modernisation of their premises. It is hoped that the trade generally will follow this lead, but I realise that it is not so easy for the small shopkeeper who may be faced with adverse trading conditions.

In respect of air pollution, the smoke concentration in the winter months would appear to be stabilising, on the average figures of 65 and 58 microgrammes per cubic metre respectively for Ewell and Epsom, as shown in the figures for November, December, January and February of 1968/69. While the use of bituminous coal is still decreasing, the rate as measured by smoke in the air, will not show the dramatic fall of previous years, but the figures are very good as measured by those in other parts of the country.

I remark on the number of complaints (38) concerning the burning of garden refuse. Smoke from this source pollutes the air and it is poor service by the community, where the declared aim is to improve the environment.

In general terms the work of the Department continues to expand with shifts of emphasis as pressures exert their influence. This is illustrated in those aspects, such as Destruction of Wasps' Nests, Control of Feral Pigeons, complaints as to Foxes, Squirrels, etc., where the public are now seeking the aid of the local authority to remedy environmental conditions, not of true public health significance, but more of domestic nuisance.

I regret to report that Mr. G. S. Forbes died on the 13th November 1969. He had been the Council's first Veterinary Surgeon, being originally appointed under the Act of 1939. Mr. Forbes was an acknowledged expert on the breeding and keeping of horses and his wise counsel will be greatly missed.

I would like to record my appreciation to the Members of the Council for their continued support and particularly to Alderman W. J. Clark, P.P.I.A.A.S., F.R.S.A., F.R.S.H., Chairman of the Public Health Committee, for the help and guidance proffered by Dr. D. J. Sheerboom, Medical Officer of Health, to the Officers of other Departments for their co-operation and to the staff of the Department for their continuing loyal support.

I am, Ladies and Gentlemen, Your obedient servant,

L. H. GRACE,
Chief Public Health Inspector.

SANITARY INSPECTION OF THE AREA

Summary of Inspections and Visits

Dwelling Houses:	
Under P.H. Act and Housing Acts	499
Reinspections	1,228
Multiple Occupation	58
Other Premises:	
Under P.H. Acts 1936 and 1961	77
Reinspections	170
Caravans	65
Complaints investigated (excluding rats and mice)	531
Drainage:	
Inspections	727
Air, Smoke, Water and Other Tests	277
Cesspools Inspected	58
Animal Boarding Establishments Act 1963	10
Betting, Gaming and Lotteries Acts 1963-64	31
Clean Air Act 1956:	
Survey Visits	330
Smoke Observations or Air Pollution	235
Epsom Downs	87
Factories:	
With Power	114
Outworkers	11
Food:	
Inspection of Premises	1,172
Visits re Unsound Food	336
Hairdressing Establishments	49
Heating Appliances and Fireguards	7
Infectious Diseases—Enquiries and Visits	144
Insect Pests	165
Keeping of Animals or Poultry	21
Noise Abatement Act 1960	36
Offices, Shops and Railway Premises Act 1963:	
Offices	53
Shops	686
Pet Animals Act 1951	27
Pigeons, Destruction of	40
Public Conveniences	60
Refuse Collection, Dustbins, etc.	155
Riding Establishments Act 1964	84
Rivers and Streams	43
Rodent Infestation	109
Schools—Sanitary Accommodation, Disinfestation, etc.	46
Scrap Metal Dealers Act 1964	3
Shops Act 1950—Hours, etc.	685
Stables and Piggeries	37
Swimming Pools	74
Theatres, Cinemas, Halls, etc.	6
Vacant Land, Dumps, etc.	100
Verminous Premises or Articles	10
Visits—Chalk Pit, etc.	586
Visits—Miscellaneous	285
	<hr/>
	9,527

COMPLAINTS

The following is a summary of complaints received during the year

Choked or defective drains	58
Dirty Milk Bottles	4
Dogs Fouling Footpaths, etc	6
Flooding	13
Foxes	12
Insanitary Condition of Premises	113
Insect Pests	51
Keeping of Animals	11
Noise	8
Offensive Smells	39
Pigeons	9
Public Conveniences	3
Refuse Disposal	45
Smoke	54
Squirrels	5
Unsound Foods	68
Miscellaneous	32
	<hr/>
Complaints received in respect of Rats and Mice Infestations	531
	710
	<hr/>
	1,241
	<hr/>

NOTICES

Number of Notices served under the following Acts

Public Health Act 1936 (Section 93) Statutory	24
Public Health Act 1936 (Informal)	101
Factories Act 1961 (Informal)	5
Food and Drugs Act 1955 (Informal)	62
Offices, Shops and Railway Premises Act 1963 (Informal)	24
	<hr/>
	216
	<hr/>

FACTORIES ACT 1961

Prescribed Particulars on the Administration of the Factories Act 1961

(1) *Inspections for purpose of provisions as to health (including inspections made by Public Health Inspectors)*

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	—	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	159	114	5	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total	159	114	5	—

(2) Cases in which defects were found

Particulars (1)	No. of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable Temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	5	2	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
Total	5	2	—	—	—

Outwork (Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		
	No. of outworkers in August list required by Section 133(1)(c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwhole- some premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (making etc. cleaning and washing)	10	—	—	—	—	—
Packing of inert goods	2	—	—	—	—	—
Painting pictures on tapestries	1	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	1	—	—	—	—	—
Lampshades	2	—	—	—	—	—
Total	16	—	—	—	—	—

HOUSING

I. Inspection of dwelling-houses during the year

1.(a)	Total number of dwelling-houses inspected under the Public Health or Housing Acts	499
(b)	Number of inspections or re-inspection	1,228
2.	Number of dwelling-houses found not to be in all respects reasonably fit for human habitation	101
II. Number of defective dwelling-houses rendered fit		66
(a)	After Informal Notice	22
(b)	After service of Formal Notice	13
(c)	Number of Notices outstanding at end of year	

III. Proceedings under the Housing Act 1957

Individual Unfit Houses

Number of dwelling-houses found unfit for human habitation and represented under Section 16(1)	9
Closing Orders made	3
Demolition Orders made	4
Orders pending at December 1969	2
Revocation of Closing Order on house being made fit	1

Clearance Areas

No. 1 Clearance Area 1967

Comprising seven dwellings; Area declared.

Houses purchased by Council for redevelopment and sale for Old People's Dwelling.

Tenants have not yet been rehoused.

Slum Clearance—Progress

Since 1955, which was the year of national survey for slum clearance, 150 properties have been dealt with as the result of Clearance Areas, the making of Demolition or Closing Orders and the reconditioning of Unfit Houses. In the majority of cases, the displaced families have been rehoused by the Corporation.

An assessment of progress, taken on information available to the Department as to the condition of houses not yet formally inspected, shows that approximately 120-140 properties may require action to secure their demolition, closure or reconditioning.

The problem is not a large one as judged by the total number of dwellings in the Borough (20,000 approximately—Census 1961).

Improvement of Houses

During the year, saw the introduction of the Housing Act 1969 which became operative in August. This new Act largely supercedes the 1964 Housing Act, but Section 19 of that Act is retained, by which tenants still have the right to apply separately for the improvement of their dwellings.

Under the 1964 Act, the Council declared six Improvement Areas, details of which are given below, and the powers of improvement within the Areas were compulsory.

The new Act of 1969 discontinues the compulsory powers, but gives local authorities the power to promote General Improvement Areas whereby monies will be available for amenity improvements, such as playgrounds, landscaping, car parking facilities, provision of street furniture, etc., and where the grants for the standard amenities, now altered to a fixed shower or bath, sink, hot and cold water supply at a fixed bath or shower, wash-hand basin and sink and provision of water closet are increased to a normal maximum of £200.

In this new procedure the Act seeks the improvement by agreement with all the parties concerned but without the compulsory powers of the 1964 Act (excepting compulsory purchase).

I regret the loss of this direct power and it remains to be seen whether the new arrangements for voluntary co-operation will be effective.

Progress under the 1964 Act, still effective as to action taken prior to August 1969, is as follows:

No. 1 Improvement Area declared 1965. Chessington Road and Oakdale Road, West Ewell. Area comprised 54 houses of which 11 were tenanted and capable of improvement.

No. 2 Improvement Area declared 1966. Hurst Road, Horton Footpath, Lower Court Road and Upper Court Road, Epsom. Area comprised 210 houses of which 48 were tenanted and capable of improvement.

No. 3 Improvement Area declared 1967. Hook Road and Miles Road, Epsom. Area comprised 298 houses of which 64 were tenanted and capable of improvement.

No. 4 Improvement Area declared 1968. Horton Hill, Epsom. Area comprised 118 houses of which 81 were tenanted and capable of improvement.

No. 5 Improvement Area declared 1969. Horton Hill (Part of), Epsom. Area comprised 44 houses of which 11 were tenanted and capable of improvement.

No. 6 Improvement Area declared 1969. Elm Road and Kingston Road (Part of), Ewell. Area comprised 79 houses of which 16 were tenanted and capable of improvement.

No. 1 Area. All works have been completed with the exception of one property which has become the subject of a Suspended Notice and will be reviewed in 1970.

No. 2 Area. Work has been completed at 27 properties, work is in progress at 1, and 14 will be reviewed in September 1971.

No. 3 Area. Work has been completed at 22 properties, work is in progress at 2, and 30 will be reviewed in November 1971.

No. 4 Area. 53 Immediate Notices have been served, 1 property has been improved, and 28 will be reviewed in June 1973.

No. 5 Area. Notices have been served and negotiations are taking place with the owners.

No. 6 Area. Notices have been served and negotiations are taking place with the owners.

In relation to the improvement of houses outside Improvement Areas, 14 applications to date have been received from tenants for the Council to exercise their powers to improve the dwellings to the Full Standard. The same basic administrative procedures are applied as if the premises were contained within Improvement Areas.

During the year 69 Standard Grants and 1 Discretionary Grant were approved by the Council, and of this number are included those in respect of properties coming within the Compulsory Improvement Scheme.

Qualification Certificates

With the introduction of the 1969 Act, provision is made whereby the owner can apply to the local authority for a Qualification Certificate. The issue of a Certificate by the local authority enables the owner to apply to the Rent Officer for a "fair" rent. He must satisfy the conditions laid down, i.e. that the standard amenities are provided, that they are for the exclusive use of the occupants, that the dwelling is in good repair having regard to its age, character and locality and disregarding internal decorative repair, it is in all other respects fit for human habitation.

Where a dwelling does not have all the standard amenities, the owner can apply for a Provisional Qualification Certificate whereby he undertakes to make such provision.

The rights of the tenants are suitably protected at each stage of procedure.

Since the coming into force of the Act in August 1969, 97 applications for Certificates in respect of rented premises have been received.

Houses in Multiple Occupation

The work of inspection and control of premises coming within the definition of Houses in Multiple Occupation, which commenced in 1963, continued during the year and the present position is as follows:

Number of inspections during 1969	58
Number of premises known to be in use at the end of 1969	17

No undue delay has been experienced in securing the improvements necessary to satisfy the standards adopted by the Council, and no action has been necessary to make Control Orders (Control Orders allow Local Authorities to take multi-occupied houses into their stewardship for a period in order to deal with the worst cases of squalor).

Rent Act 1957—Certificates of Disrepair

One application was received during the year making a total of 118 applied for since the inception of this legislation. With the coming into force of the provisions of the Housing Act 1969, which deal with the general improvement of dwellings, applications for Certificates of Disrepair are likely to cease, particularly as over the past five years only 4 new applications have been made.

FOOD AND DRUGS ACT 1955

Inspections and Supervision of Food

The inspection of food premises is a major duty imposed on Local Authorities and in this section of the Report will be seen the record of how this is achieved, in the main as to inspection of food for human consumption, inspection of retail and wholesale premises, sampling of food, both chemical and bacteriological and when necessary the taking of legal proceedings.

In general the conditions and standards of hygiene of food premises are governed by the Food Hygiene (General) Regulations 1960 and the Food Hygiene (Market, Stalls and Delivery Vehicles) Regulations 1966 and Amendment Regulations. They apply throughout the food and catering trades embracing both retail and wholesale businesses and include clubs, schools, residential establishments, staff canteens and shops. As indicated separate regulations apply to stalls and delivery vehicles, and in the Borough the retail trading at race meetings and in Epsom Market is so regulated.

The number of food premises in the Borough grouped in categories of trade are listed below:

Bakehouses and Bakers' Shops	18
Butchers	30
Cafes	42
Clubs	9
Confectioners	59
Dairies and Milk Depots	3
Fishmongers and Fried Fish Shops	15
Greengrocers (Wholesale and Retail)	37
Grocers (Wholesale and Retail)	61
Kitchens:	
Factory	13
Hotel	12
Hospital and Nursing Home	9
School—Public	18
School—Private	11
Multiple Food Stores (Supermarkets)	10
Public Houses and Off-licences	56
Total	<hr/> 403 <hr/>

Of the preceding premises, 187 are registered under Section 16 of the Food and Drugs Act 1955 as follows:

Manufacture of Ice-cream	1
Retail sale of Ice-cream	125
Preparation or manufacture for sale of sausages or potted, pressed, pickled or preserved food	61

The inspection of Food Premises is a constant duty imposed by the Regulations. The number of inspections made during the year is shown in the following table:

<i>Type of Premises and Vehicles</i>	<i>No. of Inspections and Visits</i>
Bakehouses	26
Bakers and Confectioners	60
Butchers	90
Cafes, Canteens and Kitchens	185
Dairies and Milk Shops	14
Fishmongers and Poulterers	58
Fried Fish Shops	19
Greengrocers and Fruitcrers	83
Grocery and Provision Stores	182
Ice-cream Manufacturers	45
Ice-cream Retailers	16
Ice-cream Vehicles	12
Licensed Premises	125
Market Stalls and Food Vehicles (including Epsom Downs)	65
Sweets and Sugar Confectionery	29
Visits, miscellaneous (not included above)	112
Multiple Food Stores	59
Total	<hr/> 1,172 <hr/>

Informal Action

Arising from the 1,172 inspections and visits to food premises action to secure compliance with the Regulations was obtained through verbal or written Informal Notices with 98 items receiving attention.

MILK

Milk Production

There are two milk producers in the Borough. The supply is collected and pasteurised outside the Borough by the trade.

Milk Supply

All milk sold is retailed by a few large Dairy Companies, being mainly produced in distant areas and transported to large processing plants within the London Region.

The sale of untreated milk has steadily declined during the post-war years and is now of negligible amount.

Control in respect of the distribution and types of milk sold in the Borough is obtained under the following Regulations:

(a) *Distribution*

Milk and Dairies (General) Regulations 1959:

Milk Distributors registered in this area	3
Premises registered as Dairies	3

(b) *Licensing*

Milk (Special Designation) Regulations 1963 and the Milk (Special Designation) (Amendment) Regulations 1965.

Dealers (Pre-packed) Milk Licences valid for a maximum period of five years expiring on the 31st December 1970 are in force in respect of the following milks:

Homogenised	1
Untreated	9
Pasteurised	25
Sterilised	22
Ultra Heat Treated	15

Milk Sampling

During the year 126 samples of milk were taken from milk distributors, including supplies to local hospitals and schools, and submitted for bacteriological examination.

The following summary gives details of the grade of milk samples and results of the examinations:

<i>Grade</i>	<i>No. of Samples</i>
Untreated	3
Pasteurised	108
Sterilised	9
Ultra Heat Treated	5
Homogenised	1

Results of Tests

	<i>Methylene Blue</i>	<i>Phosphatase</i>	<i>Turbidity</i>	<i>Colony Count</i>
Homogenised	1	1	—	—
Untreated	3	—	—	—
Pasteurised	108	108	—	—
Sterilised	9	—	9	—
Ultra Heat Treated	—	—	—	5

All the tests were satisfactory for the purposes applied.

Ice-Cream

Registration

There are 127 premises registered for the sale and storage of ice-cream and of this number one is also registered for the manufacture, in accordance with Section 14 of the Food and Drugs Act 1955. With the exception of the one manufacturer, all retailers obtain their supplies from outside the Borough. It should be noted that mobile vans selling ice-cream are not registerable, but are controlled through the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966.

Bacteriological Sampling

During the year 111 samples of ice-cream were taken for bacteriological examination. The provisional grading showed the following results:

	<i>Soft</i>	<i>Hard Prepacked</i>		<i>Total</i>
Grade I	2	15	75	92
Grade II	—	2	2	4
Grade III	1	2	—	3
Grade IV	—	11	1	12
	3	30	78	111

The results show a satisfactory picture, with only 15 samples falling within Grades III and IV out of a total of 111 samples.

The standard, which determines the bacteriological state of the ice-cream has no statutory enforcement, and those falling within Grades III and IV are not judged as being unfit for human consumption.

Chemical Sampling

Two samples were submitted to the Public Analyst and found to be satisfactory.

Sampling for Chemical Analysis

During the year 103 samples were submitted for chemical analysis and it will be seen from the following summary that a wide range of commodities was covered:

COMMODITY	NUMBER OF SAMPLES EXAMINED		REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY	
	<i>Formal</i>	<i>Informal</i>	<i>Formal</i>	<i>Informal</i>
Ale	—	1	—	—
Apples	—	1	—	—
Beef, minced	1	—	—	—
Beef, sliced tinned	—	1	—	—
Brandy Butter	—	1	—	—
Brandy Flavouring	—	1	—	—
Butter	1	—	—	—
Butterscotch	—	1	—	—
Cake Mix	—	1	—	—
Cheese	—	3	—	—
Cherries	—	1	—	—
Cherry Dumplings	—	1	—	—
Chervil Powder	—	1	—	—
Chicken Fritters	—	1	—	1
Chilli Beans	—	1	—	—
Chilli Powder	—	1	—	—
Chocolate Eclairs	—	1	—	—
Chopped Ham	—	1	—	—
Cooking Chocolate	—	2	—	1
Cornflakes	—	1	—	—
Cornish Pastie Filling	—	1	—	—
Cream	—	1	—	—
Cream Eclairs	—	1	—	—
Cream Slice	—	2	—	—
Diarrhoea Mixture	—	1	—	—
Gravy Mix	—	1	—	—
Healthvita	—	1	—	—
Herring Rolls	—	1	—	—
Hershey's Syrup	—	1	—	—
Hot Dog	—	1	—	—
Ice-cream	—	1	—	—
Iced Lolly	—	1	—	1
Iodine	—	1	—	—
Jaffa Cake	—	1	—	—
Lemons	—	1	—	—
Marmalade	—	1	—	—
Marzipan	—	1	—	—
Meat Balls	—	1	—	—
Milk	10	8	—	1
Milk Shake Flavouring	—	1	—	—
Mincedmeat	—	1	—	—
Orange Drink	—	2	—	—
Pate	—	2	—	—
Peanuts	—	1	—	—
Pease Pudding	—	1	—	—
Peas, tinned	—	1	—	—
Pepper	—	1	—	—
Peppermint Flavouring	—	1	—	—

(Table continued on next page)

continued from previous page)

COMMODITY	NUMBER OF SAMPLES EXAMINED		REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY	
	Formal	Informal	Formal	Informal
Pilchards	—	1	—	—
Potato Croquette	—	1	—	—
Potato Mash	—	1	—	—
Rosehip Syrup	—	1	—	—
Rhubarb	—	1	—	—
Rum	1	—	—	—
Salmon Mayonnaise	—	1	—	—
Sausages	9	—	1	—
Scalp Lotion	—	1	—	—
Slimmer Biscuits	—	1	—	—
Soup	—	1	—	—
Spam	—	1	—	—
Spice	—	1	—	—
Steak & Kidney Pudding	—	1	—	—
Stem Ginger	—	1	—	—
Sweetcorn	—	1	—	—
Tea	—	2	—	—
Tomatoes, tinned	—	1	—	—
Tuna	—	1	—	—
Veal, Ham & Egg Pie	—	1	—	—
Vitamin Yeast	—	1	—	—
Vinegar	—	1	—	—
Whisky	1	—	—	—
Grand Total	23	80	1	4

SUMMARY OF ALL SAMPLES

Food and Drugs

Chemical Analysis (including ice-cream, milk and water)

Formal	19		
Informal	84		
		103	
Water	2	2	
Bacteriological Analysis			
Ice-cream: Wrapped	108		
Soft	3		
		111	
Milk: Pasteurised	108		
Sterilised	9		
Ultra Heat Treated	5		
Untreated	3		
Homogenised	1		
		126	
Sundry Foods	85		
		85	
Water: Domestic	107		
Mental Hospitals:			
Deep Well	44		
Mixed Supply	44		
Mains Supply	180		
Swimming Baths and Pools	43		
		418	
			740
			845

Of the 103 chemical samples, five were reported as unsatisfactory, details of which are given below:

<i>Sample No. and Description</i>	<i>Irregularity</i>
<i>Sample No. 3—Pasteurised Milk</i>	This informal sample contained approximately 2% of added water by the Hortvet Freezing Point Test, caused probably by condensation of water in the sterilising plant. Subsequent samples proved satisfactory.
<i>Sample No. 10—Chicken Fritters</i>	The meat content was found to be 30% (including fat) and the Public Analyst expressed the opinion that chicken fritters must contain not less than 35% of meat. This article of food is not controlled as to its meat content by Regulation, but the manufacturers have accepted the Analyst's opinion. No further action necessary.
<i>Sample No. 11—Cooking Chocolate</i>	This sample contained vegetable fat other than cocoa butter, which is an offence in articles which are described as chocolate. Investigation showed that a labelling error had taken place at the shop in that the true description of the food did not include the word "chocolate". No further action necessary.
<i>Sample No. 41—Pork Sausages</i>	The Public Analyst certified a deficiency of 2% in the meat content, being of the opinion that pork sausages must contain not less than 65% of meat. At the time of sampling, Regulations governing the meat content were not in force but subsequently published require not less than 65% meat content. No offence at time of sampling.
<i>Sample No. 59—Ice Lolly</i>	A labelling offence was shown on analysis in that the lolly contained sugar as the sweetening agent, but this was not declared. Informal action provided for relabelling.

MEAT AND OTHER FOODS

Slaughterhouses

There are no licensed slaughterhouses in the Borough.

Condemned Meat and Other Foods

The following meat and other foods were inspected at shop and food stores within the Borough and found to be unfit for human consumption.

<i>Commodity</i>	<i>No.</i>	<i>cwts.</i>	<i>lbs.</i>	<i>No. Tins or Jars</i>	<i>No. Packets or Cartons</i>
Baby Foods	—	—	—	182	—
Confectionery	—	—	56	—	408
Dried Fruits	—	2	47	—	—
Fish, fresh	—	4	63	—	—
Fish, tinned	—	—	—	172	—
Frozen Foods	—	—	—	—	6,402
Frozen Pastry	1,216	—	48	—	—
Fruit, tinned	—	—	25	2,849	—
Ice-cream	744	—	—	—	—
Jams	—	—	—	167	—
Meat, fresh	—	12	93	—	—
Meat, tinned	—	3	33	—	—
Meat, tinned	—	—	—	199	—
Milk Products	—	—	—	424	—
Poultry (Chickens)	114	—	—	—	—
Pudding Mix	—	1	0	—	—
Soups, tinned	—	—	—	170	—
Vegetables, tinned	—	—	48	1,195	—
Sundry Foodstuffs	—	—	—	—	545

Butchers' Shops

There are 30 butchers' shops in the Borough, all of which have been periodically inspected during the year, 90 visits being made.

The high standard of cleanliness and equipment which has for many years characterised this type of food shop was maintained.

Bakehouses

Twenty-six inspections and visits were made during the year to the five bakehouses which, however, supply only a small proportion of the bread and confectionery sold, the remainder shops and by mobile vans.

Complaints

During the year 38 (40) complaints were received in respect of food generally with 4 (4) specifically in respect of milk and milk bottles. The figures in brackets are for 1968.

With the exception of those which were of a minor nature, all complaints were reported to the Public Health Committee for their consideration.

Resultant action was that 4 prosecutions were authorised, details of which are as follows:

- Case No. 1.* String in Tea Cake—Defendants pleaded guilty—fined £25 with £10 10s. costs.
- Case No. 2.* Grease in Loaf of Bread—Defendants pleaded guilty—fined £25 with £10 10s. costs.
- Case No. 3.* Mouldy Loaf of Bread—Defendants pleaded guilty—fined £25 with £15 15s. costs.
- Case No. 4.* Cigarette End in Boned Beef—Defendants pleaded guilty—fined £35 with £10 10s. costs.

FOOD HYGIENE

Two Courses of Lectures were given during the year by Mr. Gray the Senior Public Health Inspector.

The first, commencing on the 4th February, was held at the Town Hall and comprised 4 weekly lectures. Attendances were reasonably good and it is judged that the effort was worthwhile. The second, held at Pit House, Ewell, commenced on the 6th May being three in number, given weekly. The attendance was small.

Although the general response was not good, the Committee felt that lectures on Food Hygiene, forming part of the overall picture of food control, should continue to be given.

THE FOOD (CONTROL OF IRRADIATION) (AMENDMENT) REGULATIONS 1969

These Regulations, which came into force on the 1st December 1969, amend the main Regulations of 1967 to permit the supply of irradiated food to any registered medical practitioner for patients who require a sterile diet as an essential factor of their treatment and it is expected that such patients will be in hospital, where the necessary environment can be provided.

THE MEAT (STERILIZATION) REGULATIONS 1969

The Regulations, which came into operation on the 1st November 1969, require:

"all knacker meat and meat (other than the meat of a rabbit or hare) which is imported otherwise than for human consumption, as well as all butchers' meat or imported meat which in either case is unfit for human consumption, to be sterilized before entering the chain of distribution. They also require that imported meat which is unfit for human consumption or imported otherwise than for human consumption and without an official certificate or meat inspection stamp and which is stored in or removed from the port of entry shall be sterilized or shall bear a notice to the effect that the meat is not fit for human consumption."

SHOPS ACTS 1950 and 1965

The Council is the authority responsible for the enforcement of the provisions of the Act as they relate to Hours of Closing and Sunday Trading.

The General Closing Hours are 8 o'clock with 9 o'clock on the late day. Wednesday is generally recognised as the Early Closing Day but the effect of the Shops (Early Closing Days) Act 1965 allows the shopkeeper to choose his own Early Closing Day and strict observance of Wednesday is decreasing. No Orders as to six-day trading are in force in the Borough.

Inspections and visits relating to shop hours and the posting of notices showed an increase from 584 in 1968 to 685 this year.

OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

The following report on work of administration of the Act during the year has been submitted to the ~~Ministry of Labour~~ *DEPARTMENT OF EMPLOYMENT & PRODUCTIVITY*

TABLE A
REGISTRATIONS AND GENERAL INSPECTIONS

<i>Class of Premises</i>	<i>No. Premises registered during year</i>	<i>Total No. premises registered end of year</i>	<i>Premises receiving inspection during year</i>
Offices	17	241	57
Retail Shops	21	439	330
Wholesale shops, warehouses	—	18	12
Catering establishments open to the public, canteens	1	58	52
Fuel storage depots	—	1	1
Totals	39	757	452

TABLE B
NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES — 648

TABLE C
ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>Number of Persons employed</i>
Offices	3,147
Retail shops	2,127
Wholesale departments, warehouses	136
Catering establishments open to the public	400
Canteens	51
Fuel storage depots	1
Total	5,862
Total Males	2,981
Total Females	2,881

There has been a good and uniform acceptance by those concerned as to the requirements of this new legislation, and the routine inspection of offices and shops now forms a part of the Public Health Inspectors' normal duties.

Twenty accidents were reported during the year. Each was investigated and a quarterly return thereon was submitted to the Ministry of Labour.

CLEAN AIR ACTS 1956/1968

Complaints

Fifty-four complaints were received during the year in connection with smoke nuisances. These were dealt with informally.

Thirty-eight of the complaints related to bonfires on domestic premises. Most householders respond when they are approached, but undoubtedly the Englishman's love of a bonfire results in some thoughtless actions giving rise to nuisance

Measurement of Air Pollution

Since 1963/4, the measurement of smoke and sulphur dioxide in the air has been monitored at the two stations set up in Epsom and Ewell, in conjunction with the Warren Spring Laboratory, Ministry of Technology.

The following tables show that there has been a marked fall in the amount of smoke and SO₂ measured in microgrammes per cubic metre, from the year 1965, and the readings for that year compared very favourably with like readings in other Authorities with similar physical characteristics.

The Council have not considered it necessary to promote smoke control areas in the light of the original low recordings and the subsequent marked improvement. This improvement is the result of social change whereby the householder has changed from the burning of coal to the use of electricity, gas, oil and smokeless fuels, for space heating and domestic hot water.

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	N	105	71	30	17	N	N	16	23	79	93	62
	1966	86	39	54	N	15	9	N	14	33	36	58	52
	1967	65	47	16	30	16	12	8	12	20	16	83	83
	1968	63	68	31	26	62	14	15	16	17	22	52	87
	1969	57	63	57	17	15	16	14					
Highest daily reading	1965	367	280	243	79	48	44	34	56	51	226	228	302
	1966	175	104	139	57	32	31	22	43	80	80	165	267
	1967	173	136	32	37	37	25	21	42	40	37	307	230
	1968	150	226	88	71	151	51	32	49	47	66	176	271
	1969	220	187	104	50	37	27	26	37	53	118	109	220
Lowest daily reading	1965	10	22	14	9	7	3	4	4	6	10	10	10
	1966	21	10	9	1	3	3	4	3	5	6	9	9
	1967	18	14	3	10	3	3	3	3	4	6	13	9
	1968	3	7	6	6	21	3	5	6	5	2	8	11
	1969	6	13	22	3	4	5	5	4	5	9	6	23

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	N	290	271	109	92	N	N	56	82	220	225	183
	1966	258	213	171	N	93	77	N	76	147	234	201	155
	1967	323	184	120	183	163	99	105	65	176	149	313	216
	1968	229	265	197	131	132	78	70	44	87	124	219	282
	1969	313	329	258	128	124	115	105					
Highest daily reading	1965	545	647	562	338	170	333	142	142	194	452	411	470
	1966	407	526	376	214	164	282	104	209	458	570	350	591
	1967	503	439	342	427	479	182	225	174	508	339	553	581
	1968	936	556	444	441	291	198	103	132	367	316	552	462
	1969	601	643	515	233	333	212	182	195	198	301	301	406
Lowest daily reading	1965	92	41	42	30	66	129	18	18	35	60	40	44
	1966	58	75	62	36	52	42	40	15	44	117	50	44
	1967	33	69	58	90	76	65	57	23	22	50	130	54
	1968	48	83	58	33	27	24	45	0	26	38	114	176
	1969	185	175	135	29	37	25	43	6	38	80	84	88

N — indicates that insufficient results were obtained

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT THE TOWN HALL, THE PARADE, EPSOM

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	72	102	52	26	16	20	11	17	18	63	70	48
	1966	74	31	37	28	14	10	10	14	30	31	66	46
	1967	52	49	17	37	13	13	9	13	19	14	79	83
	1968	61	74	35	22	66	15	15	14	16	28	49	75
	1969	45	62	60	18	16	19	16					
Highest daily reading	1965	214	299	184	76	45	113	28	72	37	158	190	193
	1966	148	83	136	75	28	32	27	42	61	79	154	168
	1967	162	151	33	64	39	27	20	51	40	34	209	243
	1968	171	220	86	70	154	53	25	29	48	82	151	228
	1969	195	133	114	53	37	38	28	50	65	142	84	173
Lowest daily reading	1965	7	14	10	6	3	2	4	5	7	10	7	8
	1966	11	3	7	7	4	3	5	3	4	3	18	14
	1967	14	7	7	10	0	5	2	2	5	3	11	10
	1968	7	10	7	5	14	2	8	4	3	6	9	7
	1969	4	12	14	3	4	5	9	7	7	10	6	22

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	163	243	138	87	69	137	37	38	41	126	141	88
	1966	170	92	97	102	67	35	31	48	85	71	115	88
	1967	111	88	67	120	61	59	61	50	28	16	77	74
	1968	78	76	70	34	31	27	24	10	22	26	38	57
	1969	41	154	65	30	54	86	59					
Highest daily reading	1965	355	562	319	255	213	298	73	74	101	266	331	237
	1966	402	237	205	198	134	137	54	110	231	187	262	442
	1967	295	253	108	203	128	94	157	390	58	51	191	166
	1968	448	209	175	91	66	46	39	35	40	130	63	143
	1969	127	292	143	66	120	224	87	157	165	313	128	280
Lowest daily reading	1965	32	82	29	42	27	48	12	12	20	39	41	24
	1966	46	24	37	45	24	12	18	18	37	30	53	48
	1967	33	37	31	69	37	22	21	25	6	0	12	4
	1968	19	24	13	6	0	13	6	0	11	5	6	14
	1969	17	14	12	6	20	32	32	45	32	34	38	48



PUBLIC HEALTH

Health Inspectors conduct routine checks at all food stalls on Epsom Downs during Derby week.



DENTAL SERVICE

A Dental Officer and his Assistant carry out treatment at the Ewell Dental Clinic.



PHYSIOTHERAPY

A Senior Physiotherapist carries out remedial treatment at the Epsom Health Clinic.

EPSOM DOWNS

Sale of Food

The sale of food on Epsom Downs at Race Meetings is controlled by the Food Hygiene (Market Stalls and Delivery Vehicles) Regulations 1966 and in the main traders in recent years have responded to the improvements required by the Regulations.

Special arrangements are made for a piped water supply to be made available and traders provide their own means of heating water for refreshments and cleansing.

Regular inspection of the stalls is carried out and, in addition, samples of water, ice-cream, and other foods are taken during the Race Meetings and throughout the summer.

Sanitary Accommodation

The permanent public convenience sited on the Tattenham Corner Road was opened during the year. It has been built by the Corporation and provides for the public who visit the Downs for recreational purposes.

Temporary sanitary accommodation for the periods covered by the Race Meetings is also provided and staffed by the Corporation. The five mobile conveniences, converted trolley buses, are connected to the sewers and have a piped water supply.

Cleansing

The cleansing of the Downs during and after Race Meetings is carried out under the direction of the Epsom Grand Stand Association Limited. Of recent years there has been a marked improvement in this service and the work is completed more quickly after the Meetings.

At other times the cleansing of the Downs is the responsibility of the Conservators.

RODENT CONTROL

Prevention of Damage by Pests Act 1949

In accordance with requirements of the above Act, occupiers of land or buildings are under an obligation to notify the Local Authority in writing, of the presence of rats or mice in substantial numbers. It is also the duty of every Local Authority to take such steps as may be necessary to secure, as far as practicable, that their district is kept free from rats and mice. They are empowered to make inspections and enforce owners and occupiers to carry out such operations as may be necessary for this purpose.

Advice and assistance are given to persons who report any such infestation or apply for information as to preventive measures. Such advice is based on methods of destruction recommended by the Infestation Control Division of the Ministry of Agriculture, Fisheries and Food.

One full-time Rodent Operative is employed in the Department and the following is a summary of the work carried out:

<i>Number of</i>	1966	1967	1968	1969
Complaints investigated	736	648	723	710
Inspections and visits	4,345	3,760	3,826	3,477
Premises found infested	562	546	534	579
Treatments carried out by the Rodent Operative at:				
Private premises	662	711	594	583
Business premises	109	84	93	68
Rats known to have been caught and destroyed by the Rodent Operative	401	375	288	288

In assessing the number of rats killed, a conservative estimate would be formed by using a factor of 5 to every rat actually found dead as the use of Warfarin poison, a blood anti-coagulant, causes the rat affected to seek cover before it dies.

Sewer Rat Control

Special attention is paid to the inspection of sewers for the presence of rats. It is encouraging to find that the rat population of the sewers is small, due principally to the control measures in force on the ground

DISINFECTION

In recent years disinfection associated with infectious disease has virtually ceased. Only 5 library books and 16 items of clothing were so treated. This principally reflects the very low incidence of infectious disease but is linked with the more modern approach as to the preventative value of such treatment.

INSECT AND OTHER PESTS

Disinfestation

No treatment was carried out for bug infestation and only 3 premises were disinfested for fleas.

Destruction of Wasps' Nests

This service is carried out on request at a charge of 5s. per nest destroyed (no extra charge for additional nests treated at the time of visit).

During the year 281 nests were so treated in comparison with 73 in 1968, and the receipts amounted to £62. It is probable that the relatively good winter of 1968/69 allowing more queen wasps to survive and the fine summer of 1969, accounted for the increase.

Feral Pigeons—Control

A limited control of Feral Pigeons is exercised by trapping the birds where they infest public places, 141 being caught by this method.

Foxes

Within recent years the fox has moved from the countryside into the urban and semi-urban areas of towns where he appears to be settling. His appearance in these areas causes concern to the urban dwellers and the Local Authority is called upon to take action to destroy the fox. No statutory powers exist, except to the Ministry of Agriculture, Fisheries and Food, and these are restricted to rural areas. However, up to now, the Ministry have conducted fox shoots in the urban and semi-urban areas and have given advice (protection measures for poultry keepers, etc.). From next year the Ministry propose to discontinue their services to these areas and have indicated that the Local Authorities should institute their own control methods.

Consultations are taking place but the future is not clear. If it is thought that the control of foxes in urban and semi-urban areas is desirable, then legislation should be introduced to that end. Unilateral action by Local Authorities is unproductive, the fox recognising no boundaries.

MORTUARY

The use of the Council's Mortuary for post-mortem purposes ceased in 1964, and until the new joint accommodation is ready at the Epsom District Hospital, the South West Regional Hospital Board has agreed to undertake this work at the present Hospital mortuary. The charge made for the service is £2 2s. per body, and the cost for 1969 was £310 16s.

HAIRDRESSERS' AND BARBERS' ESTABLISHMENTS

Bye laws are in force for the purpose of securing:

- (a) the cleanliness of premises on which a hairdresser's or barber's business is carried on and of the instruments, towels, materials and equipment used therein; and
- (b) the cleanliness of the hairdressers or barbers working in such premises in regard to both themselves and their clothing.

In that connection 49 visits and inspections were made.

CONSUMER PROTECTION ACT 1961

Under this Act the Secretary of State is empowered to make Regulations imposing requirements in respect of any prescribed class of goods to prevent or reduce risk of death or personal injury. The following Regulations are administered by the Department:

Nightdresses—Safety from Fire

The Nightdresses (Safety) Regulations 1967, provide safety standards in respect of low inflammability for children's nightdresses, labelling of all other nightdresses which are not flame resistant, and certain other safeguards.

No infringements of the Act were recorded.

Fire Guards

The Heating Appliances (Fireguards) Regulations 1953 require that fireguards to gas fires, electric fires and oil heaters shall be robustly made and comply with certain specified standards of construction and fitting. No complaints were received; 7 routine visits were made.

Oil Heaters

Standards of construction of oil heaters are prescribed in the Oil Heaters Regulations 1962 as amended by the Oil Heaters Regulations 1966.

No complaints were received and 5 visits were made to premises selling second-hand goods.

Toys

The Toys (Safety) Regulations 1967 prohibit the use of celluloid in toys other than ping pong balls and impose restrictions in relation to paint which may be used on toys, and a Circular (12/69) was received from the Home Office early in the year drawing attention to standards in respect of paints used in the trade.

Two samples were submitted to the Public Analyst; both complied with the Regulations. Ten visits were made in respect of the Regulations.

NOISE ABATEMENT ACT 1960

In my Annual Report for 1968 I commented on the special campaign mounted in the Spring of that year in which local authorities were asked by the Ministry of Housing and Local Government to make a determined attack on industrial and neighbourhood noise.

Apart from the overriding question of aircraft noise, the incidence of industrial and neighbourhood noise continues to be low, as shown by the complaints received, namely 8, all of which were dealt with informally.

MISCELLANEOUS

Keeping of Animals

The Pet Animals Act 1951 requires pet shops to be licensed; four applications were received and granted during the year.

In respect of the boarding of cats and dogs, the Animal Boarding Establishments Act 1963 similarly requires the licensing of premises. Three applications were received and granted during the year.

Riding Establishments Act 1964

The Act provides for a system of yearly licensing by local authorities.

Briefly, in considering the application for a licence, a local authority must have regard to the suitability and qualification of the applicant and a report from a Veterinary Surgeon or Veterinary Practitioner of an inspection of the premises. The suitability of the horses kept at any such establishment is also a determining factor.

Six riding establishments were licensed during the year.

Betting, Gaming and Lotteries Acts 1963/64

Seven applications for permits for the provision of amusements with prizes were made and granted in respect of the following premises:

Public Houses	.	.	.	.	5
Cafes	.	.	.	.	2

The permits are for a period of 3 years and at the end of the year 47 were in force as follows:

Public Houses	.	.	.	.	36
Cafes	.	.	.	.	10
Cinemas	.	.	.	.	1

Scrap Metal Dealers' Act 1964

This Act makes provision for the local registration of all scrap metal dealers and every local authority is required to maintain a register of persons carrying on business in their areas as scrap metal dealers.

There is no discretion to refuse registration, which can be effective for three years, and will be cancelled unless application is received for its renewal.

Apart from the registration by the local authority the dealer is required to keep a record of his dealings in scrap metal and this record is subject to scrutiny by the Police.

Eight premises are so registered.

PART FOUR

SCHOOL

HEALTH

SERVICE

BOROUGH OF EPSOM AND EWELL

EDUCATION COMMITTEE

Report of the School Medical Officer for the Year 1969

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the following Report on the School Health Service for 1969.

During the year there was an increase of 105 pupils coming within the scope of the School Health Service giving a total of 8,909. Once again I am very pleased to report that their general health remained good and that there were no outbreaks of any important infectious disease. Sonne Dysentery, so often a cause for concern, was down to two cases only, and although it was a "Measles Year", there were only 135 cases notified between the ages of 5 and 15 years. How much this low figure was due to Measles Vaccination it is impossible to say as unfortunately the supply of the Vaccine ceased in the middle of the year. There was a slight increase in the number of cases of Scarlet Fever, but fortunately this disease no longer produces the serious complications which were common many years ago. There were no cases of Diphtheria or Poliomyelitis and it is equally reassuring to note that there were no cases of Pulmonary or Non-Pulmonary Tuberculosis notified under the age of 15 years.

A great deal is heard nowadays regarding the manners and activities of the younger generation. It is, therefore, very agreeable to be able to report that all the Senior Schools take an active part in helping several of the Social Agencies in the Borough, both statutory and voluntary. There is no doubt that particularly in the care of the elderly, morale is raised by seeing young people helping them, and it also has a very good effect on the young people themselves. This is an aspect of outside school activities which I hope will increase.

Health Education in all its aspects is becoming an increasingly important subject to any Health Department and on many topics the obvious audience is that of school children. It is therefore satisfactory to find that increasing numbers of Talks are being given in schools, particularly by Health Visitors, and also to Parent-Teacher Associations. So many of our present social problems can only be solved if the next generation is brought up with the correct knowledge and understanding.

As was mentioned last year, due in many cases to the rapid strides in medical and surgical knowledge, more cases of physically and mentally handicapped children are now living to school age. Great care has to be taken, therefore, to see that they receive not only the best education that their disability allows but also that correct treatment both medically and socially is continued not only for the handicap itself but also for the child as a whole and his family. Table III shows the provision made for this special educational treatment.

During the year each School was approached regarding the question of the Teachers keeping up-to-date with their Chest X-rays. This has always been a difficult subject as Teachers generally in the past have been rather against regular routine X-rays for various reasons even though their importance is strongly advocated by the Department of Education and Science. However, I am pleased to be able to report, that although there could obviously be an improvement, 53% of all the Teachers in the Borough have had recent Chest X-rays and several more have agreed to have it done in the near future. There was, however, a very marked difference between all the Schools, and three are to be congratulated in that all 100% of their Teachers had been X-rayed.

I should like to thank the Members of the Education Committee for their encouragement and also to take this opportunity of thanking all who co-operate with us especially the Borough Education Officer and his Staff and the Head Teachers. I should also once again like to pay a warm tribute to the medical, nursing and clerical staffs, who are responsible for running the Service.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient Servant.

*D. J. SHEERBOOM,
School Medical Officer.*

School Population

The maintained school population at the end of the year was as follows:

Primary	5,182
Secondary	3,607
Special	26
Nursery	94
	<hr/>
	8,909

The number of maintained school departments in the Borough on 31st December 1969 was:

Primary	18
Secondary	5
Special (Partially-Hearing Unit and The Lindens, St. Ebba's Hospital)	2
Nursery Classes (West Ewell and Cuddington Croft Schools)	2
	<hr/>
	27

Routine Medical Inspection

Routine medical inspection by age groups is carried out as follows:

Primary	(i) On entry	Complete medical examination
	(ii) During year in which age of 8 is reached	Eye and hearing test only
Secondary	(iii) On entry	Complete medical examination
	(iv) During year in which age of 13 is reached (if more than a year since last routine examination)	Eye test only
	(v) During year in which age of 15 is reached	Complete medical examination
	(vi) During year in which age of 17 is reached (if more than a year since last routine inspection)	Eye test only

General Physical Condition

At each routine medical inspection School Medical Officers are required to assess the general physical condition of the children and to record the assessment under the headings "satisfactory" or "unsatisfactory".

Without exception the condition of the children was recorded as satisfactory.

Cleanliness Inspections

During the year 1,418 individual examinations of pupils were carried out by Health Visitors. Thirty pupils were found to have nits in the hair.

Materials to treat the verminous condition were supplied to the parents concerned.

Defects found at Routine Medical Inspections

Number of pupils examined	4,126
Number of pupils found to require treatment	705
Percentage of pupils in need of treatment	17.1
Number of defects requiring observation	1,174
Number of defects requiring treatment	736

Parents present at Inspections

Parents were present at 1,185 routine medical inspections, a percentage of 28.7.

School Eye Clinics

Ophthalmic Surgeons visited the Ewell Court and Epsom Clinics regularly throughout the year and below is given a summary of work carried out:

Number of sessions	65
Number of children who attended during the year	673
Number of attendances during the year	902
Number of examinations for errors or refraction (including squint):	
(a) Glasses ordered or re-ordered	245
(b) Glasses not ordered	652
Number referred for orthoptic or surgical treatment of squint	7
Number referred to Hospital for treatment unobtainable at Clinic	4

Postural Defects

A qualified Physiotherapist attended at the two main Clinics to conduct remedial exercise classes for children with orthopaedic defects relating to posture and feet.

Number of sessions	111
Number of children treated in 1969	143
Number of attendances	280
Number of new cases admitted during the year	78
Number of cases discharged	40

Bedwetting

In the course of the year 8 children were loaned electric enuresis alarms, with varying degrees of success.

DENTAL INSPECTION AND TREATMENT

REPORT OF MR. G. B. ASHWORTH, F.D.S., SENIOR DENTAL OFFICER

Report on the Dental Services within the Borough of Epsom and Ewell for the Year 1969

The work of the two Dental Clinics in the Borough has been maintained throughout the year, although Ewell Clinic has been staffed by only one part-time Dental Officer. Considering the size of the school population in Ewell, it is regrettable that the dental service there has had to be somewhat restricted by staff shortage. General anaesthetic sessions for extraction cases were held regularly at both Clinics and these have been particularly useful for the treatment of emergencies. Almost all the orthodontic treatment was carried out by the County Specialist at each Clinic and this work has again increased, compared with previous years.

The treatment provided was made available to children of all ages and to expectant and nursing mothers.

The School Dental Service

The number of children examined at the annual visits to the Schools was 6,799. In addition 1,206 inspections were carried out at the Clinics for children voluntarily attending for additional examinations. Some 2,678 children received treatment during the year and these included those handicapped physically and mentally who attend Special Schools in the Borough and surrounding district. To accustom the mentally handicapped children to accept some degree of regular dental care is considered a particularly worthwhile service.

Convalescent Homes

Any delicate child who attends a school maintained by the Local Education Authority may be provided with convalescent home treatment, free of charge. Such treatment may be recommended for periods up to 4 weeks.

During 1969, 16 school children were sent for convalescent holidays by the Council.

Protection against Tuberculosis

With the active co-operation of Head Teachers, the Scheme was continued for the protection of School-leavers (age groups 13-14) by inoculation with B.C.G. vaccine: 396 children were inoculated compared with 399 in 1968, 10.3%, i.e. 41 children were tuberculin positive. In addition 30 older children were inoculated.

Speech Therapy

The general administration of this Service is controlled by the County Medical Officer. Mrs. Young continued throughout the year on a part-time basis at Ewell Clinic, but in June we lost the services of Miss Cooper on marriage. We were fortunate in being allocated the services of Miss C. K. Stammers and although she did not take up her appointment until September she very quickly made in-roads into the waiting list. Miss Stammers is employed part-time at Ewell Clinic, Epsom Clinic and the Riverview School Partially-Hearing Unit.

Details of the work carried out by the Speech Therapists during the year are given below. Nineteen pupils were on the waiting list at the end of the year.

	<i>Epsom Clinic</i>	<i>Ewell Clinic</i>	<i>Riverview Partially- Hearing Unit</i>
Number of treatment sessions	71	99	41
Number of consultation sessions with parents and teachers	9	7	6
Number of children discharged during the year:			
(a) cured	14	21	1
(b) improved	12	9	6
(c) other reasons	1	6	1
Number under treatment at end of year	11	15	8
Number under supervision at end of year	14	22	16

School Meals and Milk

The following is a summary showing the number of children taking meals and milk on a day in September 1969:

<i>Category</i>	<i>Total No. in Attendance</i>	MEALS			MILK	
		<i>Free</i>	<i>Full Cost</i>	<i>% of total taking meals</i>	<i>No. taking milk</i>	<i>% of total taking milk</i>
Infant	1906	45	1584	85.0	1848	97.0
Junior	2956	83	2501	86.1	2701	91.4
Secondary	3476	78	2611	77.4	—	—
Totals	8338	206	6696	82.8	4549	—

Early Diagnosis and Treatment of the Deaf Child

The aim of the Health Visitors and School Medical Officers is to ascertain all young deaf children and make plans for their special treatment before they enter School at the age of 5 years.

To ensure that no deaf children have been missed, all pupils aged 6-7 years are given a routine pure-tone audiometer test in School. In 1969, 935 pupils were so tested and of these 51 (or 5.5%) showed significant hearing defects (see Table VI).

At the end of the year the ascertained hard of hearing children were:

(a) At Special Schools:	
Partially deaf	7
Totally deaf	3
(b) In ordinary Schools and under supervision by Medical Officers and Teachers of the Deaf	10
(c) Under school age and under medical supervision	5

Hearing Aid provided

In age groups: 0-5	5
5 and over	20

Home Tuition

Some handicapped children, whilst waiting for admission to a Special School, or because of the severity of their disabilities, have to be provided with education in their own homes, and we are grateful for the helpful co-operation we receive from the Borough Education Officer when such provision becomes necessary. I am pleased to report that this was required for one child only during the course of the year—a maladjusted boy who received Home Tuition from January to September prior to his admission to a special residential school.

Deaths of School Children

Deaths of children of school age during the year were as follows:

Boy aged 6 years—Cerebral haemorrhage
Boy aged 15 years—Accidental drowning

Employment of Children

School Medical Officers carried out 69 examinations of children in order to ascertain their fitness to undertake part-time employment. All were found to be fit.

Handicapped Pupils

Table III sets out by categories the handicapped pupils ascertained as at 31st December 1969 and shows what provision was made for their special educational treatment.

Child Guidance

In October 1969, we welcomed Mr. Cummings to the staff (half-time) as a second educational psychologist, to cover the Ashted and Leatherhead areas.

During the past year, in addition to referrals by school, psychological and medical services and the juvenile courts, an increasing number of mothers have made a direct approach to the Clinic. Preventive services have been expanded by fortnightly discussion groups for Teachers (November 1969) and for Health Visitors working in Epsom and Ewell (October 1969). The Teachers' Group has been led by Mrs. Carroll, psychotherapist, who has joined me in the discussion group for Health Visitors. The latter have been able to talk of the families they visit, and more particularly of the common problems of management presented to them by mothers of babies or more often mothers of babies and under-fives. Group discussion by Health Visitors of their work with such mothers has increased their own insights. By not immediately referring such problems to the Child Guidance Clinic for psychiatric evaluation, they have avoided reinforcing such mothers' feelings of inadequacy in the first place, and gone on to rebuild their confidence in their ability to bring up children successfully. It is hoped that as a result fewer families will need to be referred to the Child Guidance Clinic. Should, however, Health Visitors reveal in group discussion personality disorders in the parents, often with associated marital discord, a psychiatric consultation can then be offered to the family.

When children over five have been referred to the Clinic with established emotional disorders, staff members have joined together in seeing the whole family, and usually continued to work with them as a group, though as before selected children and one or both of their parents have been offered individual psychotherapy. Conferences on such children have been attended by their Teachers. Where such children are due for transfer, e.g. from infant to junior school, both Head Teachers have been invited. Visiting Head Teachers have begun to indicate the numbers of disturbed (disruptive and withdrawn) children in their schools, underlining the urgent need for a day class for maladjusted children in this area.

Clayhill Remedial Centre, West Hill, Epsom

The demand for remedial education continues and the Centre keeps very busy. Nearly all the children are in the Primary School age group and usually fall into the category of backward readers and spelling difficulties. During the course of the year 28 children from Schools within this Borough have attended the Centre.

The Teacher-in-Charge, Miss Hickey, was this year invited to attend a Course concerning the Study of Children with Specific Developmental Reading difficulties. This Course is being held at The Language Training Laboratory in Dallas, Texas, between 1st February and 1st August 1970. No doubt Miss Hickey will bring some new ideas back with her.

The Lindens Day Unit for Disturbed Children, St. Ebba's Hospital, Epsom

Autism is a serious mental disturbance found in children. They are withdrawn and do not communicate although they are not deaf and have normal intelligence. Unless treated appropriately a child may become permanently affected.

The Unit was opened four years ago to provide educational treatment for these children. A Consultant Psychiatrist is in charge of the Unit and Mrs. B. Furneaux is the Teacher-in-Charge. Other children with disturbed behaviour are admitted to the Unit if they can be helped by similar educational methods.

During 1969 the children have been taken on several day outings to places of general interest including Chessington Zoo, Madame Tussaud's, The Planetarium, Windsor Safari Park, Hampton Court and Bognor.

At Christmas the children gave a Nativity Play at their Party, which was a great success.

Most of the older children are taken on shopping excursions to Epsom and the surrounding district in order for them to become accustomed to mixing with people and to try and train them in the use of money.

There are 33 children on the Register and in the past year 5 children have left the Unit to attend Special Schools for Educationally Sub-Normal children.

During the year only 4 children living in the Borough of Epsom and Ewell attended the Unit.

TABLE I
A. Periodic Medical Inspections

<i>Age Groups Inspected (by years of birth)</i>	<i>Number of Pupils Inspected</i>	<i>Pupils Found to Require Treatment</i>		
		<i>For defective vision (excluding squint)</i>	<i>For any other condition recorded on Table II</i>	<i>Total individual pupils</i>
1965 and later	60	—	4	4
1964	771	33	62	89
1963	135	5	13	15
1962	21	—	4	4
1961	759	51	5	56
1960	29	3	2	4
1959	24	2	2	4
1958	421	70	20	85
1957	255	36	15	48
1956	613	100	3	102
1955	121	19	3	21
1954 and earlier	917	254	30	273
Totals	4,126	573	163	705

B. Other Inspections

Notes

A special inspection is one that is carried out at the request of a parent, doctor, nurse, teacher or other person.

A re-inspection is a follow-up inspection arising from one periodic medical inspection or out of a special inspection.

Number of special inspections	918
Number of re-inspections	501
Total	<u>1,419</u>

C. Infestation with Vermin

(i) Number of individual examinations of Pupils in Schools by Health Visitors	1,418
(ii) Number of individual Pupils found to be infested	30
(iii) Number of individual Pupils in respect of whom cleansing notices were issued	Nil

TABLE II

Return of Defects found in the Course of Medical Inspections in 1969

<i>Defect or Disease</i>	<i>Periodic Inspections</i>		<i>Special Inspections</i>	
	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>
Skin	18	75	—	1
Eyes:—				
(a) Vision	573	424	207	358
(b) Squint	5	9	—	—
(c) Other	3	46	—	2
Ears:—				
(a) Hearing	16	48	8	10
(b) Otitis media	2	12	—	1
(c) Other	16	40	1	4
Nose and Throat	11	105	3	3
Speech	11	29	56	4
Cervical Glands	—	11	—	1
Heart and Circulation	1	20	—	—
Lungs:—				
(a) Pulmonary Tuberculosis (definite)	—	—	—	—
(b) Other Lung Diseases	11	43	2	1
Development:—				
(a) Hernia	2	4	—	—
(b) Other	4	72	—	—
Nervous System:—				
(a) Epilepsy	4	4	—	—
(b) Other conditions	3	39	2	9
Orthopaedic:—				
(a) Posture	13	39	1	1
(b) Foot defects	12	25	7	2
(c) Other	12	70	6	1
Psychological:—				
(a) Development	7	11	2	—
(b) Stability	2	19	7	4
Other Diseases	10	29	—	7
Totals	736	1,174	302	409

TABLE III

Handicapped Pupils as Ascertained at 31st December, 1969

<i>Category</i>	<i>At ordinary school under medical supervision</i>	<i>At special school or Hospital School</i>	<i>Attending Speech Clinic</i>	<i>Attending Child Guidance Clinic</i>	<i>At ordinary school—on waiting list for special school</i>	<i>Home teaching provided</i>	<i>Under school age and under medical supervision</i>	<i>At ordinary school—on waiting list for Speech and Child Guidance Clinics</i>	<i>At home awaiting admission to special school</i>	<i>Total</i>
Blind and partially sighted .	—	1	—	—	—	—	—	—	—	1
Deaf and partially deaf .	10	10	—	—	—	—	5	—	—	25
Delicate	9	4	—	—	—	—	2	—	—	15
Physically Handicapped .	12	13	—	—	—	—	6	—	—	31
Educationally Sub-Normal .	1	39	—	—	—	—	—	—	—	40
Epileptic	12	—	—	—	—	—	3	—	—	15
Maladjusted	—	10	—	18	—	—	1	5	—	34
Speech	—	—	86	—	—	—	—	19	—	105
Totals	44	77	86	18	—	—	17	24	—	266

TABLE IV

Treatment of Pupils attending Maintained Primary and Secondary Schools

		<i>Number of cases treated or under treatment during the year</i>
<i>(a) Diseases of the Skin</i>		
Ringworm—(i) Scalp	. . . . .	—
(ii) Body	. . . . .	2
Scabies	. . . . .	4
Impetigo	. . . . .	2
Other skin diseases	. . . . .	15
Total	. . . . .	<u>23</u>
<i>(b) Eye Diseases, Defective Vision and Squint</i>		
External and other (excluding errors of refraction and squint)	.	7
Errors of refraction (including squint)	. . . . .	897
Total	. . . . .	<u>904</u>
Number of pupils for whom spectacles were prescribed	. .	<u>245</u>
<i>(c) Diseases and Defects of Ear, Nose and Throat</i>		
Received operative treatment for adenoids and chronic tonsillitis		1
Received other forms of treatment	. . . . .	2
Total	. . . . .	<u>3</u>
<i>(d) Orthopaedic and Postural Defects</i>		
(a) Pupils treated at Clinics or Out-Patient Departments	.	143
(b) Pupils treated at School for postural defects	. . .	21
Total	. . . . .	<u>164</u>
<i>(e) Other Treatment Given</i>		
Cervical Glands	. . . . .	—
Heart and circulation	. . . . .	1
Lungs	. . . . .	24
Development: (a) Hernia	. . . . .	2
(b) Other	. . . . .	4
Nervous: (a) Epilepsy	. . . . .	17
(b) Other	. . . . .	3
Miscellaneous Minor Ailments	. . . . .	15
Total	. . . . .	<u>66</u>

TABLE V
Dental Inspection and Treatment

1. Number of pupils inspected	8,005
2. Number found to require treatment	2,678
3. Number treated at school dental clinics	2,009
4. Number of attendances made by pupils for treatment	5,728
5. Number of half-days devoted to inspections	78
6. Number of half-days devoted to treatment	887
7. Number of permanent teeth extracted	237
8. Number of permanent teeth filled	2,001
9. Number of temporary teeth extracted	669
10. Number of temporary teeth filled	1,252
11. Total number of teeth filled	3,253
12. Number of administrations of general anaesthetics	382
13. Number of pupils X-rayed	193
14. Number of scalings and gum treatments	97
15. Number of teeth conserved with silver nitrate	48
16. Number of teeth root filled	1
17. Courses of treatment completed	1,309
18. Orthodontics:	
Cases remaining from previous year	314
New cases commenced during year	80
Cases completed during the year	52
Cases discontinued during year	3
Number of removable appliances fitted	145
Number of fixed appliances fitted	6
Pupils referred to Hospital Consultant	5
19. Prosthetics:	
Number of pupils supplied with full upper or full lower denture	Nil
Number of pupils supplied with partial denture	1

TABLE VI
Audiometry

	<i>Routine Examinations</i>	<i>Retests and Specials</i>	<i>Total</i>
(1) Number of children tested	935	189	1,124
(2) Number of children who failed test	64	41	105
(3) Result of investigations by School Medical Officers:—			
(a) No significant hearing loss	17	17	34
(b) No significant hearing loss but child appears to be mentally retarded	—	—	—
Deafness due to:—			
(c) catarrhal conditions	34	13	47
(d) old otitis media	3	3	6
(e) injury	—	—	—
(f) other causes	7	6	13
(g) undetermined causes	3	2	5
(h) untraced or left the district	—	—	—
(i) already supplied with Hearing Aids	—	—	—
(j) investigations remaining to be carried out	—	—	—
	64	41	105
(4) Recommendations:—			
(a) No action required	7	10	17
(b) For observation only	43	25	68
(c) Referred to Audiology Clinic	5	4	9
(d) Referred to General Practitioner	8	—	8
(e) Referred to Ear, Nose and Throat Consultant	1	2	3
(f) Special position in Class	—	—	—
(g) Hearing Aid and supervision by Teacher of the Deaf	—	—	—

TABLE VII

Notification of Communicable Diseases by Head Teachers During 1969

(a) *Infectious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Infection at Home</i>	<i>Total Exclusions</i>
Smallpox	—	—	—	—
Diphtheria	—	—	—	—
Scarlet Fever	13	—	1	14
Enteric Fever	—	—	—	—
Measles	135	2	—	137
Whooping Cough	1	—	—	1
German Measles	8	—	—	8
Chickenpox	210	—	—	210
Mumps	127	3	—	130
Jaundice	—	—	—	—
Other	1	—	—	1
Totals	495	5	1	501

(b) *Contagious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Total Exclusions</i>
Ringworm	2	—	2
Impetigo	2	—	2
Scabies	4	—	4
Other	—	—	—
Totals	8	—	8

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